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Fill in this information to identify yo	ur case:	
United States Bankruptcy Court for	the:	
Central District of Ca	alifornia	
Case number (If known):	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13	☐ Check if this is amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

06/24

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint* case—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name	Eric	
	Write the name that is on your	First name	First name
	government-issued picture identification (for example, your	Steven	
	driver's license or passport).	Middle name	Middle name
	. , ,	Coker	<u> </u>
	Bring your picture identification to your meeting with the trustee.	Last name	Last name
		Suffix (Sr., Jr, II, III)	Suffix (Sr., Jr, II, III)
2.	All other names you have used in the last 8 years	First name	First name
	•	The thank	THE HAITE
	Include your married or maiden names and any assumed, trade names and doing business as	Middle name	Middle name
	names.	Last name	Last name
	Do NOT list the name of any		
	separate legal entity such as a corporation, partnership, or LLC that is not filing this petition.	Business name (if applicable)	Business name (if applicable)
		Business name (if applicable)	Business name (if applicable)
3.	Only the last 4 digits of your Social Security number or	xxx - xx - <u>6</u> <u>1</u> <u>9</u> <u>8</u>	xxx - xx
	federal Individual Taxpayer	OR	OR
	Identification number (ITIN)	9xx - xx	9xx - xx

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Debtor 1		Eric	Steven	Coker	Case number (if known)			
		First Name	Middle Name	Last Name				
			About Debtor 1	:	About Debtor 2 (Spo	use Only in a Joint Case):		
4.	Your Empl	oyer Identification						
	Number (E		EIN		EIN			
			 EIN		 EIN			
5.	Where you	ı live			If Debtor 2 lives at a	different address:		
			21698 Cande	ela Dr	-			
			Number S	treet	Number Street			
			Santa Clarita	a, CA 91350-8537				
			City	State ZIP Code	City	State ZIP Code		
			Los Angeles	3				
			County		County			
				address is different from the one above, one that the court will send any notices to ing address.		address is different from yours, fill ne court will send any notices to you is.		
			Number S	treet	Number Street			
			P.O. Box		P.O. Box	<u> </u>		
			City	State ZIP Code	City	State ZIP Code		
6.		re choosing <i>this</i>	Check one:		Check one:			
	district to	file for bankruptcy	Over the la have lived i district.	st 180 days before filing this petition, I in this district longer than in any other	Over the last 180 have lived in this district.	days before filing this petition, I district longer than in any other		
				her reason. Explain. S.C. § 1408)	I have another re (See 28 U.S.C. §			
			-		-	_		

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Debtor 1 Eric		Eric	Steven		Coker		Case number (if known)
		First Name	Middle Na	me	Last Name		
Part	t 2: Tell the	e Court About Yo	ur Bankr	uptcy Cas	е		
7.		of the Bankruptcy e choosing to file	Bankrup Ch Ch Ch			ach, see <i>Notice Required by</i> e top of page 1 and check th	r 11 U.S.C. § 342(b) for Individuals Filing for ne appropriate box.
8.	How you wi	ll pay the fee	deta chec a cre to P I rec judg offic choc	ils about how ok, or money edit card or c ed to pay the ay The Filing quest that my e may, but is ial poverty lin ose this optio	v you may pay. Typorder. If your attor theck with a pre-price fee in installment of Fee in Installment of fee be waived (Your not required to, when that applies to your arteries).	pically, if you are paying the finey is submitting your paymented address. If you choose this option, its (Official Form 103A). The may request this option of aive your fee, and may do so our family size and you are upone in the submitted in	ith the clerk's office in your local court for more fee yourself, you may pay with cash, cashier's ent on your behalf, your attorney may pay with sign and attach the <i>Application for Individuals</i> only if you are filing for Chapter 7. By law, a conly if your income is less than 150% of the unable to pay the fee in installments). If you <i>Chapter 7 Filing Fee Waived</i> (Official Form
9.	Have you fil within the la	ed for bankruptcy st 8 years?	✓ No. □Yes.	District		When MM / Di	Case number
10.	pending or l spouse who case with yo	kruptcy cases being filed by a is not filing this bu, or by a rtner, or by an	☑ No. □ Yes.	District		When MM / DD /	Relationship to you Case number, if known
11.	Do you rent	your residence?	☑ No.	No. Go	andlord obtained at to line 12.		you? ment Against You (Form 101A) and file it

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Deb	tor 1 Eric	C	Steven		Coker		Case number (if known)	
	First	Name	Middle Na	ıme	Last Name			
Par	t 3: Report Abo	out Any Busin	esses Y	ou Own as	a Sole Proprieto	-		
12.	Are you a sole p		☑ No.	Go to Part 4.				
	any full- or part-t business?	ime	☐ Yes.	Name and lo	ocation of business			
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a		Nam	e of business,	if any			
	corporation, partn		Num	ber Stre	eet			
	If you have more than one sole proprietorship, use a separate sheet and attach it to this		-					
	petition.		City			State	ZIP Code	
			Che	ck the appro	priate box to describe			
				Health Care	Business (as defined	in 11 U.S.C. § 101(27A))	
				Single Asset	Real Estate (as defin	ed in 11 U.S.C. § 101(5	1B))	
				Stockbroker	(as defined in 11 U.S	.C. § 101(53A))		
				Commodity E	Broker (as defined in	11 U.S.C. § 101(6))		
			☐ None of the above					
13.	Are you filing un 11 of the Bankru and are you a sn debtor?	ptcy Code,	If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can see appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent ball sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents exist, follow the procedure in 11 U.S.C. § 1116(1)(B).					
	For a definition of	small business	☑ No.	I am not	filing under Chapter	11.		
	debtor, see 11 U.S 101(51D).	S.C. §	☐ No.		g under Chapter 11, t	out I am NOT a small bu	siness debtor according to the definition in the	
			☐ Yes.				ebtor according to the definition in the der Subchapter V of Chapter 11.	
			☐ Yes.				ebtor according to the definition in the according to the definition in the	

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Deb	tor 1	Eric	Steven	Coker		C	Case number (if known) _		
		First Name	Middle Name	Last Name			, ,		
Par	t 4: Report	t if You Own or Ha	ave Any Hazaro	dous Property or	Any Prope	rty That Needs I	mmediate Attentior	า	
14.	Do you owr	n or have any	☑ No.						
	property the	at poses or is ose a threat of	☐ Yes. Wha	t is the hazard?					
	imminent and identifiable hazard to public health or								
safety? Or do	you own any	cy? Or do you own any erty that needs immediate							
property t attention?		at needs illillediate	If im	mediate attention is	needed, why	is it needed?			
		e, do you own oods, or livestock							
	that must be	fed, or a building rgent repairs?							
		.ge							
			Whe	re is the property?	<u> </u>	0			
					Number	Street			
					City		State	ZIP Code	

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Debtor 1	Eric	Steven	Coker	Case number (if known)	
	First Name	Middle Name	Last Name		

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

✓ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

reasonably tried to do so.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Debtor 1	Eric	Steven	Coker		Case n	umber	(if known)	
	First Name	Middle N	ame Last Name					
Part 6:	Answer These Question	s for Re	eporting Purposes					
	nat kind of debts do you ve?	16a.	Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." No. Go to line 16b. Yes. Go to line 17.					
			for a business or investment of No. Go to line 16c. Yes. Go to line 17.	or thi	s debts? Business debts are debtough the operation of the business	s or in	vestment.	
		100.	State the type of debts you ow	ve u	at are not consumer debts or bus	illess c	lebis.	
Do exe and pai for	e you filing under Chapter 7? you estimate that after any empt property is excluded d administrative expenses and that funds will be available distribution to unsecured editors?	√ 1		er 7.	7. Go to line 18. Do you estimate that after any exemple paid that funds will be available t			
	ow many creditors do you timate that you owe?		1-49				000	
	ow much do you estimate you sets to be worth?		\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion	
	ow much do you estimate you bilities to be? Sign Below		\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion	
For you	If I have States C If no atto have obt I reques: bankrup and 357	chosen to code. I ur comey reptained and trelief in tand make toy case 1.	to file under Chapter 7, I am aw nderstand the relief available un presents me and I did not pay on nd read the notice required by 1 accordance with the chapter of king a false statement, conceal	ware nder or ag 11 U of title	each chapter, and I choose to progree to pay someone who is not ar .S.C. § 342(b). e 11, United States Code, specified property, or obtaining money or progress.	der Char oceed in attorn d in thi operty	apter 7, 11,12, or 13 of title 11, United under Chapter 7. ey to help me fill out this document, I s petition.	

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Debtor 1	Eric	Steven	Coker	Case number (if known)
	First Name	Middle Name	Last Name	
represented	torney, if you are d by one ot represented by an ou do not need to file this	proceed under each chapter for 11 U.S.C. § 34	Chapter 7, 11, 12, or 13 of or which the person is eligibates 2(b) and, in a case in which	his petition, declare that I have informed the debtor(s) about eligibility to title 11, United States Code, and have explained the relief available under ble. I also certify that I have delivered to the debtor(s) the notice required by a \$707(b)(4)(D) applies, certify that I have no knowledge after an inquiry with the petition is incorrect.
		X /a/Bania	min Heston	Date 04/29/2025
		·		Date <u>04/29/2025</u> MM / DD / YYYY
		Signature	of Attorney for Debtor	, 22,
		Printed name Nexus B Firm name	ankruptcy	
		Costa M		CA 92626
		City	esa	State ZIP Code
		,	one (949) 312-1377	Email address ben@nexusbk.com
		297798		CA
		Bar numbe	er	State

C	ase 2:25-bk-1357	'8 Doc 1	Filed 04/30/25 Document Page 1	Entered 04, age 9 of 77	/30/25 11:12:23	Desc Main
Fill in this in	nformation to identify you	ur case and this f				
Debtor 1	Eric	Steven	Coker			
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse, if fil	ling) First Name	Middle Name	Last Name		_	
United State	es Bankruptcy Court for the	: Cent	ral District of	California		
Case numb	<u> </u>					Check if this is an amended filing
Official I	Form 106A/B					
Sched	lule A/B: Pro	perty				12/15
□ No	ou own or have any legal of the Death of the Part 2.	or equitable intere	est in any residence, buil	ding, land, or simila	ar property?	
_	o. Go to Part 2.		is the property? Check al	I that apply.		claims or exemptions. Put
1.1	21698 Candela Dr Street address, if available,		ngle-family home uplex or multi-unit building	l	-	red claims on Schedule D: nims Secured by Property.
	description	☐ C	ondominium or cooperativ anufactured or mobile hor		Current value of the entire property?	Current value of the portion you own?
	Santa Clarita, CA 9135	In	vestment property		\$650,000.00	\$650,000.00
		ZIP Code O	meshare ther has an interest in the pre	operty? Check one.		our ownership interest ancy by the entireties, or
	County	√ D	ebtor 1 only		Fee Simple	
		_ D	ebtor 2 only ebtor 1 and Debtor 2 only least one of the debtors a	and another	Check if this is com (see instructions)	munity property
			information you wish to		n, such as local	
		Source	ce of Value: Recent sal	es		
	he dollar value of the port ave attached for Part 1. W					\$650,000.00
Part 2:	Describe Your Ve					

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

■ No

√ Yes

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	3.1	Make: Model: Year: Approximate mileage: Other information:	Tesla Model Y 2022 71,000	Who has an interest in the property? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	the amount of any securic Creditors Who Have Cla Current value of the entire property? \$19,500.00	laims or exemptions. Put ed claims on Schedule D: ims Secured by Property. Current value of the portion you own? \$19,500.00		
4.	 Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ✓ No Yes 							
	4.1	Make: Model: Year: Other information:		Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	the amount of any secure	laims or exemptions. Put ed claims on Schedule D: ims Secured by Property. Current value of the portion you own?		
5. Pa	you have attached for Part 2. Write that number here							
				nd Household Items est in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.		
6.	Exam	os Doscribo	s, furniture, linen	s, china, kitchenware pods and furnishings		\$4,000.00		
7.	7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games							
No ✓ Yes. Describe Electronics \$2,000.						\$2,000.00		

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Debtor Coker, Eric Steven Case number (if known)

8.	Collectibles of value						
	Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or						
	baseball card collections; other collections, memorabilia, collectibles						
	☑ No						
	Yes. Describe						
9.	Equipment for sports and hobbies						
	Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments						
	☑ No						
	☐ Yes. Describe						
10.	Firearms						
	Examples: Pistols, rifles, shotguns, ammunition, and related equipment						
	☑ No						
	Yes. Describe	l					
	Tes. Describe						
		l					
11.	Clothes						
	Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories						
	□ No						
	✓ Yes. Describe Clothes	\$1,000.00					
12.	Jewelry						
	Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold,						
	silver						
	No						
	✓ Yes. Describe Jewelry	\$200.00					
13.	Non-farm animals						
	Examples: Dogs, cats, birds, horses						
	□ No						
	✓ Yes. Describe	unknown					
	rei	unknown					
14.	Any other personal and household items you did not already list, including any health aids you did not list						
17.							
	☑ No	Ì					
	Yes. Give specific information						
		I					
15.	Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached						
10.	for Part 3. Write that number here	\$7,200.00					
Pa	rt 4: Describe Your Financial Assets						

Official Form 106A/B Schedule A/B: Property page 3

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Debtor Coker, Eric Steven

Case number (if known)

Do y	ou own or have any leg	gal or equitable interest in any	of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
16.		ı have in your wallet, in your hom	ne, in a safe deposit box, and on hand when y	you file your petition	
	☑ No ☑ Yes			. Cash:	\$47.00
17.	Deposits of money				
			nts; certificates of deposit; shares in credit ur ultiple accounts with the same institution, list		
	□ No				
	✓ Yes		Institution name:		
		17.1. Checking account:	Bank of America		\$37.00
		17.2. Checking account:	California Credit Union	_	\$18.00
		17.3. Checking account:	Capital One Spark (business)		\$16.00
		17.4. Checking account:	Chase Bank (business)		\$15.00
		17.5. Checking account:	Wells Fargo (business)		\$1.00
		17.6. Checking account:	Wells Fargo (business)		\$1.00
		17.7. Savings account:	Wells Fargo	_	\$1.00
18.		or publicly traded stocks	erage firms, money market accounts		
	√ No				
	☐ Yes	Institution or issuer name:			
				_	
		-			
19.	Non-publicly traded s LLC, partnership, and	•	ated and unincorporated businesses, incl	uding an interest in an	
	☐ No				
	Yes. Give specific information about them	Name of entity:		% of ownership:	
	u16111	Emmanuel Church of Jes	sus, Apostolic Faith, Inc.	100.00%	\$0.00
		Eric Coker Productions,	_	100.00%	\$0.00

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Debtor Coker, Eric Steven

Case number (if known)

20.	Government and corp			
	Negotiable instruments Non-negotiable instrum			
	√ No			
	Yes. Give specific information about them	Issuer name:		
21.	Retirement or pension			
	Examples: Interests in	IRA, ERISA, Keogh,	, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans	
	□ No			
	Yes. List each account separately.	Type of account:	Institution name:	
		Pension plan:	CalSTRS	unknown
22.	Security deposits and			
			made so that you may continue service or use from a company paid rent, public utilities (electric, gas, water), telecommunications companies, or	
	others	s with landiolds, prep	paid tent, public utilities (electric, gas, water), telecommunications companies, or	
	₫ No			
	☐ Yes		Institution name or individual:	
		Electric:		
		Gas:		
		Heating oil:		
		Security deposit on	rental unit:	
		Prepaid rent:		
		Telephone:		
		Water:		
		Rented furniture:		
		Other:		
23.		or a periodic paymen	it of money to you, either for life or for a number of years)	
	√ No			
	☐ Yes	Issuer name and de	escription:	

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24.	Interests in an education IRA, in an acc 26 U.S.C. §§ 530(b)(1), 529A(b), and 529	count in a qualified ABLE program, or under a qualified state tuition program.	
	√ No		
	_	and description. Separately file the records of any interests.11 U.S.C. § 521(c):	
	_	and doesp. 1011 Coparatory into the record of any interested in Coparatory (10).	
			_
25.	Trusts, equitable or future interests in for your benefit	property (other than anything listed in line 1), and rights or powers exercisable	Ð
	☑ No		
	☐ Yes. Give specific		
	information about them		
00	Detects accoming to the design to the	and the sistematical and the s	
26.		secrets, and other intellectual property sites, proceeds from royalties and licensing agreements	
	✓ No	and, procedure from regarded and floorising agreements	
	Yes. Give specific		1
	information about them		
			•
27.	Licenses, franchises, and other genera	al intangibles	
	Examples: Building permits, exclusive lic	censes, cooperative association holdings, liquor licenses, professional licenses	
	☑ No		
	Yes. Give specific information about them		
Mone	ey or property owed to you?		Current value of the
			portion you own? Do not deduct secured
			claims or exemptions.
28.	Tax refunds owed to you		
	₫ No		
	Yes. Give specific information about them, including whether you	Federal:	
	already filed the returns and	State:	
	the tax years		
		Local:	
29.	Family support		
	Examples: Past due or lump sum alimon	y, spousal support, child support, maintenance, divorce settlement, property	
	settlement		

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	₫ No			
	Yes. Give specific information		Alimony:	
			Maintenance:	
			Support:	
			Divorce settlement:	
			Property settlement:	
			r roporty contomorn.	
30.	Other amounts someone owes you			
	Examples: Unpaid wages, disability insurance p Social Security benefits; unpaid loar		/, vacation pay, workers' compensation,	
	₫ No			
	☐ Yes. Give specific information]
	<u> </u>			J
31.	Interests in insurance policies			
	Examples: Health, disability, or life insurance; h	ealth savings account (HSA); credit, h	nomeowner's, or renter's insurance	
	✓ No ✓ Nome the incurance company			
	Yes. Name the insurance company of each policy and list its value Cor	mpany name:	Beneficiary:	Surrender or refund value:
	<u>-</u> -			·
32.	Any interest in property that is due you from		and the second s	
	If you are the beneficiary of a living trust, expect property because someone has died.	proceeds from a life insurance policy	, or are currently entitled to receive	
	☑ No			
	☐ Yes. Give specific information			1
	<u> </u>			_
33.	Claims against third parties, whether or not y		demand for payment	
	Examples: Accidents, employment disputes, ins	surance claims, or rights to sue		
	✓ No ☐ Yes. Describe each claim			٦
	Tes. Describe each claim.			
34.	Other contingent and unliquidated claims of	every nature, including countercla	ims of the debtor and rights to set of	f
	claims	, ,	v	
	☑ No			_
	Yes. Describe each claim			
				J
35.	Any financial assets you did not already list			
	✓ No			٦
	Yes. Give specific information			

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36.	Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here	\$136.00
Pa	rt 5: Describe Any Business-Related Property You Own or Have an Interest In. List any	real estate in Part 1.
37.	Do you own or have any legal or equitable interest in any business-related property?	
	☑ No. Go to Part 6.	
	☐ Yes. Go to line 38.	
		Current value of the portion you own? Do not deduct secured claims or exemptions.
38.	Accounts receivable or commissions you already earned	
	⊴ No	
	Yes. Describe	T
39.	Office equipment, furnishings, and supplies	_
	Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chair electronic devices	rs,
	☑ No	
	Yes. Describe]
40.	Machinery, fixtures, equipment, supplies you use in business, and tools of your trade	_
	√ No	
	Yes. Describe	T
41.	Inventory	_
	☑ No	
	Yes. Describe]
42.	Interests in partnerships or joint ventures	_
	☑ No	
	Yes. Describe	
	Name of entity: % of ownership:	

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43.	Customer lists, mailing list	s, or other compilations	
	√ No		
	Yes. Do your lists inclu	de personally identifiable information (as defined in 11 U.S.C. § 101(41A))?	
	☐ No		
	Yes. Describe.		
	_		
44.	Any business-related prop	erty you did not already list	
	√ No		
	Yes. Give specific		
	information		
	_		
	_		
45.	Add the dollar value of all	of your entries from Part 5, including any entries for pages you have attached	40.00
		er here	\$0.00
Pa	ι	Farm- and Commercial Fishing-Related Property You Own or Have an I	Interest In.
40		ave an interest in farmland, list it in Part 1.	
46.		gal or equitable interest in any farm- or commercial fishing-related property?	
	✓ No. Go to Part 7.		
	Yes. Go to line 47.		
			Current value of the
			portion you own? Do not deduct secured
			claims or exemptions.
47.	Farm animals		
	Examples: Livestock, poulti	y, farm-raised fish	
	√ No		
	☐ Yes		
48.	Crops—either growing or	harvested	
	☑ No		
	☐ Yes. Give specific		
	information		

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No Yes Yes Yes Yes Yes Sive specific Yes Y	49.	Farm and fishing equipme	nt, implements, machinery, fixtures	, and tools of trade		
50. Farm and fishing supplies, chemicals, and feed No		₫ No				
No Yes Yes Yes Yes Yes Silve specific Information Yes Silve specific Information Yes Yes Silve specific Information Yes Yes Silve specific Information Yes Silve specific Information Yes Yes Silve specific Information Yes Yes Silve specific Information Yes Yes		☐ Yes				
No Yes Yes Yes Yes Yes Silve specific Information Yes Silve specific Information Yes Yes Silve specific Information Yes Yes Silve specific Information Yes Silve specific Information Yes Yes Silve specific Information Yes Yes Silve specific Information Yes Yes						
Yes	50.	Farm and fishing supplies	, chemicals, and feed			
51. Any farm- and commercial fishing-related property you did not already list No		☑ No				
✓ No		☐ Yes				
✓ No						
Yes. Give specific information	51.	Any farm- and commercial	I fishing-related property you did no	ot already list		
52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here		☑ No				
\$0.00 Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership 1 No Yes. Give specific information						
Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership 1 No Yes. Give specific information		mornation				
Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership 1 No Yes. Give specific information	52.	Add the dollar value of all	of your entries from Part 6, includin	g any entries for page	s you have attached	
Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership Information		for Part 6. Write that numb	er here		·	\$0.00
Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership Information						
Examples: Season tickets, country club membership 1	Pa	rt 7: Describe All	Property You Own or Have a	an Interest in Tha	t You Did Not List Above	
✓ No Yes. Give specific information	53.			st?		
Yes. Give specific information			country club membership			
Add the dollar value of all of your entries from Part 7. Write that number here		_				
Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$650,000.00 56. Part 2: Total vehicles, line 5 \$19,500.00 57. Part 3: Total personal and household items, line 15 \$7,200.00 58. Part 4: Total financial assets, line 36 \$136.00 59. Part 5: Total business-related property, line 45 \$0.00						
Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$650,000.00 56. Part 2: Total vehicles, line 5 \$19,500.00 57. Part 3: Total personal and household items, line 15 \$7,200.00 58. Part 4: Total financial assets, line 36 \$136.00 59. Part 5: Total business-related property, line 45 \$0.00						
Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$650,000.00 56. Part 2: Total vehicles, line 5 \$19,500.00 57. Part 3: Total personal and household items, line 15 \$7,200.00 58. Part 4: Total financial assets, line 36 \$136.00 59. Part 5: Total business-related property, line 45 \$0.00						
Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$650,000.00 56. Part 2: Total vehicles, line 5 \$19,500.00 57. Part 3: Total personal and household items, line 15 \$7,200.00 58. Part 4: Total financial assets, line 36 \$136.00 59. Part 5: Total business-related property, line 45 \$0.00		•				
\$650,000.00 Part 1: Total real estate, line 2 \$19,500.00 Part 2: Total vehicles, line 5 \$19,500.00 Part 3: Total personal and household items, line 15 \$7,200.00 Part 4: Total financial assets, line 36 \$136.00 Part 5: Total business-related property, line 45 \$0.00	54.	Add the dollar value of all	of your entries from Part 7. Write th	at number here	→	\$0.00
\$650,000.00 Part 1: Total real estate, line 2 \$19,500.00 Part 2: Total vehicles, line 5 \$19,500.00 Part 3: Total personal and household items, line 15 \$7,200.00 Part 4: Total financial assets, line 36 \$136.00 Part 5: Total business-related property, line 45 \$0.00						
56. Part 2: Total vehicles, line 5 \$19,500.00 57. Part 3: Total personal and household items, line 15 \$7,200.00 58. Part 4: Total financial assets, line 36 \$136.00 59. Part 5: Total business-related property, line 45 \$0.00	Pai	rt 8: List the Tota	Is of Each Part of this Form			
56. Part 2: Total vehicles, line 5 \$19,500.00 57. Part 3: Total personal and household items, line 15 \$7,200.00 58. Part 4: Total financial assets, line 36 \$136.00 59. Part 5: Total business-related property, line 45 \$0.00						
Part 3: Total personal and household items, line 15 \$7,200.00 Part 4: Total financial assets, line 36 \$136.00 Part 5: Total business-related property, line 45 \$0.00	55.	Part 1: Total real estate, lir	ne 2		→	\$650,000.00
Part 3: Total personal and household items, line 15 \$7,200.00 Part 4: Total financial assets, line 36 \$136.00 Part 5: Total business-related property, line 45 \$0.00	56.	Part 2: Total vehicles, line	5	\$19,500.00		
58. Part 4: Total financial assets, line 36 \$136.00 59. Part 5: Total business-related property, line 45 \$0.00				<u> </u>		
59. Part 5: Total business-related property, line 45 \$0.00	57.	Part 3: Total personal and	household items, line 15	\$7,200.00		
59. Part 5: Total business-related property, line 45 \$0.00	58.	Part 4: Total financial asse	ets, line 36	\$136.00		
· · · · · · · · · · · · · · · · · · ·						
	59.	Part 5: Total business-rela	ted property, line 45	\$0.00		
60. Part 6: Total farm- and fishing-related property, line 52 \$0.00	60.	Part 6: Total farm- and fish	ning-related property, line 52	\$0.00		
	0.1	B /= T / L //				
61. Part 7: Total other property not listed, line 54 + \$0.00	61.	Part 7: Total other property	y not iisted, iine 54 +	\$0.00		
62. Total personal property. Add lines 56 through 61	62.	Total personal property A	dd lines 56 through 61	\$26,836.00	Copy personal property total	+ \$26,836.00

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Debtor Coker, Eric Steven	Case number (if known)
Jeptor Contain Line Statem	Case number (ii known)

63. Total of all property on Schedule A/B. Add line 55 + line 62. \$676,836.00

Official Form 106A/B Schedule A/B: Property page 11

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Fill in this information to identify your case:								
Debtor 1	Eric	Steven	Coker					
	First Name	Middle Name	Last Name					
Debtor 2								
(Spouse, if filing)	First Name	Middle Name	Last Name					
United States E	Sankruptcy Court for the	: Central	District of California					
Case number	·			Observativity (b) and				
(if known)				Check if this is an amended filing				

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/25

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

F	Part 1: Ide	entify the Property You	Claim as Exempt				
1.	You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)						
2.	For any prope	erty you list on Schedule	A/B that you claim as exe	mpt, i	fill in the information below.		
	•	ion of the property and lule A/B that lists this	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption	
	property			Che	eck only one box for each exemption.		
			Copy the value from Schedule A/B				
	Brief	21698 Candela Dr Santa Clarita, CA 91350-8537	\$650,000.00				
	description:						
				√	\$722,502.00	C.C.P. § 704.730	
	Line from Schedule A/B:	1.1			100% of fair market value, up to any applicable statutory limit	_	
	Brief description:	2022 Tesla Model Y	\$19,500.00	4	\$8,625.00	C.C.P. § 704.010	
	Line from Schedule A/B:	3.1			100% of fair market value, up to any applicable statutory limit		
3. Are you claiming a homestead exemption of more than \$214,000?							
	(Subject to adj	ustment on 4/01/28 and even	ery 3 years after that for ca	ses fil	ed on or after the date of adjustment.)		
	☐ No						
	_	ou acquire the property cove	ered by the exemption with	in 1,2	15 days before you filed this case?		
	☑ No ☐ Yes						

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Case number (if known)

Debtor 1

EricStevenCokerFirst NameMiddle NameLast Name

•	on of the property and ule A/B that lists this	Current value of the portion you own		ount of the exemption you claim eck only one box for each exemption.	Specific laws that allow exemption
property		Copy the value from Schedule A/B	Che		
Brief description:	Household goods and furnishings	\$4,000.00	⊴	\$4,000.00	0.0 0.0 2.04.000
Line from Schedule A/B:	6			\$4,000.00 100% of fair market value, up to any applicable statutory limit	C.C.P. § 704.020
Brief description:	Electronics	\$2,000.00	4	\$2,000.00	C.C.P. § 704.020
Line from Schedule A/B:	7			100% of fair market value, up to any applicable statutory limit	0.03.10.1020
Brief description:	Clothes	\$1,000.00	4	\$1,000.00	C.C.P. § 704.020
Line from Schedule A/B:	11			100% of fair market value, up to any applicable statutory limit	_
Brief description:	Jewelry	\$200.00	√	\$200.00	C.C.P. § 704.040
Line from Schedule A/B:	12			100% of fair market value, up to any applicable statutory limit	_
Brief description:	Pet	unknown	√	unknown	C.C.P. § 704.020
Line from Schedule A/B:	13			100% of fair market value, up to any applicable statutory limit	_
Brief description:	Cash	\$47.00	4	\$47.00	C.C.P. § 704.070(b)(2)
Line from Schedule A/B:	16			100% of fair market value, up to any applicable statutory limit	_
Brief description:	Bank of America Checking account	\$37.00	√	\$37.00	C.C.P. § 704.220
Line from Schedule A/B:	17			100% of fair market value, up to any applicable statutory limit	
Brief description:	Wells Fargo	\$1.00			_
Line from Schedule A/B:	Savings account			\$1.00 100% of fair market value, up to any applicable statutory limit	C.C.P. § 704.220

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Debtor 1

 Eric
 Steven
 Coker
 Case number (if known)

 First Name
 Middle Name
 Last Name

line on Schedu	on of the property and ule A/B that lists this	Current value of the portion you own		ount of the exemption you claim eck only one box for each exemption.	Specific laws that allow exemption
property		Copy the value from Schedule A/B	Crit	оск оту оне вох тог еаси ехетириот.	
Brief description:	California Credit Union	\$18.00			
	Checking account	•	$\mathbf{\Delta}$	\$18.00	C.C.P. § 704.220
Line from Schedule A/B:	17			100% of fair market value, up to any applicable statutory limit	_
Brief description:	Chase Bank (business)	\$15.00			
	Checking account		$\overline{\mathbf{A}}$	\$15.00	C.C.P. § 704.220
Line from Schedule A/B:	17			100% of fair market value, up to any applicable statutory limit	
Brief description:	Capital One Spark (business)	\$16.00			
	Checking account		A	\$16.00	C.C.P. § 704.220
Line from Schedule A/B:	17			100% of fair market value, up to any applicable statutory limit	
Brief description:	Wells Fargo (business)	\$1.00			
	Checking account		√	\$1.00	C.C.P. § 704.220
Line from Schedule A/B:	17			100% of fair market value, up to any applicable statutory limit	
Brief description:	Wells Fargo (business)	\$1.00			_
-	Checking account		√	\$1.00	C.C.P. § 704.220
Line from Schedule A/B:	17			100% of fair market value, up to any applicable statutory limit	
Brief description:	CalSTRS	unknown	4	unknown	C.C.P. § 704.115(b)
Line from Schedule A/B:	21			100% of fair market value, up to any applicable statutory limit	

			Document	Page 23 of 7	<u>7</u>		
Fill in this inform	nation to identify you	ur case:					
Debtor 1	Eric	Steven	Coker				
Debtor 1	First Name	Middle Name	Last Name				
	Tilotivanie	Middle Name	Last Name				
Debtor 2							
(Spouse, if filing)	First Name	Middle Name	Last Name				
United States I	Bankruptcy Court fo	or the: Centr	al Dist	rict of California			
Case number (if					—	
known)						☐ Check if amende	this is an
	4005					4	ωg
Official Forr	<u>n 106D</u>						
Schedu	le D: Cre	editors Who	Have C	laims Sec	ured by F	Property	12/15
Be as complete	and accurate as p	ossible. If two married	people are filing	together, both are equ	ally responsible for	supplying correct inf	ormation. If
•		dditional Page, fill it οι	it, number the en	tries, and attach it to t	his form. On the top	o of any additional pag	jes, write your
name and case	number (if known)).					
I. Do any cred	litors have claims	secured by your prope	erty?				
		mit this form to the court	with your other so	chedules. You have noth	ing else to report on	this form.	
✓ Yes. Fill	in all of the informa	tion below.					
Part 1:	_ist All Secured	Claims					
		creditor has more than or			Column A	Column B	Column C
		ore than one creditor has	•		Amount of claim	Value of collateral	Unsecured
creditors in		s possible, list the claims	in aipnabetical or	der according to the	Do not deduct the	that supports this claim	portion
					value of collateral.	olullii	If any
2.1 Freedon	n Mortgage	Describe	the property that	secures the claim:	\$341,028.00	\$650,000.00	\$0.00
Creditor's	Name	21609 C	andala Dr Sant	a Clarita, CA 91350-	9527		
PO Box	619063		andela Di Sant	a Ciarita, CA 91330-	6537		
Number	Street	As of the	date you file, the	claim is: Check all tha	t apply.		
		Contin	-				
Dallas.	TX 75261-9063	Unliqu	•				
City	State	ZIP Code Disput					
,	s the debt? Check	one. Nature of	lien. Check all tha	at apply.			
☑ Debto				e (such as mortgage or	secured car loan)		
☐ Debto	,		•	x lien, mechanic's lien)	Journal our lourn		
	r 1 and Debtor 2 on		ent lien from a lav				
_	st one of the debtor		(including a right to				
☐ Check	r if this claim relat unity debt	,					
	•	//17/2020 Last 4 dig	its of account nu	ımber 1 5 8	6		

\$341,028.00

Add the dollar value of your entries in Column A on this page. Write that number here:

Page 24 of 77 Document Debtor 1 Eric Coker Steven Case number (if known) Last Name First Name Middle Name Column A Column C Column B Additional Page Amount of claim Value of collateral Unsecured Part 1: that supports this portion After listing any entries on this page, number them beginning with 2.3, Do not deduct the claim followed by 2.4, and so forth. value of collateral. If any 2.2 SchoolsFirst Federal Credit Describe the property that secures the claim: \$42,434.00 \$19,500.00 \$22,934.00 Union 2022 Tesla Model Y Creditor's Name PO Box 11547 As of the date you file, the claim is: Check all that apply. Number Street Contingent Unliquidated Santa Ana. CA 92711-1547 Disputed City State ZIP Code Who owes the debt? Check one. Nature of lien. Check all that apply. **☑** Debtor 1 only ✓ An agreement you made (such as mortgage or secured car loan) Debtor 2 only ☐ Statutory lien (such as tax lien, mechanic's lien) ■ Debtor 1 and Debtor 2 only Judgment lien from a lawsuit $\ \square$ At least one of the debtors and ☐ Other (including a right to another offset) Check if this claim relates to a community debt Date debt was incurred Last 4 digits of account number 3/2/2022 0 0 0 1 **US Department of HUD** Describe the property that secures the claim: \$26,708.00 \$650,000.00 \$0.00 Creditor's Name 21698 Candela Dr Santa Clarita, CA 91350-8537 1 Sansome St FI 12 Number Street As of the date you file, the claim is: Check all that apply. Contingent San Francisco, CA 94104-4430 Unliquidated Disputed State ZIP Code Who owes the debt? Check one. Nature of lien. Check all that apply. **☑** Debtor 1 only An agreement you made (such as mortgage or secured car loan) ■ Debtor 2 only ☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Debtor 1 and Debtor 2 only Judgment lien from a lawsuit

Add the dollar value of your entries in Column A on this page. Write that number here: \$69,142.00 If this is the last page of your form, add the dollar value totals from all pages. \$410,170.00 Write that number here:

offset)

□ Other (including a right to

Last 4 digits of account number

At least one of the debtors and

Check if this claim relates to a

2023

community debt Date debt was incurred

another

		Do	cument	Page 25 of 77		
Fill in this infor	mation to identify you	case:				
5.1.						
Debtor 1	Eric	Steven	Coker			
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if filing	First Name	Middle Name	Last Name			
	D 1 . Q . (the: Central	Dis	trict of California		
United States	Bankruptcy Court for	the:		Gamornia		
Case number						D
(if known)						Check if this is an amended filing
						amenaea ming
<u>Official Fo</u>	<u>rm 106E/F</u>					
Schedi	ıle F/F∙ Cr	editors Who	h Have	linsecured	d Claims	10/15
Scriedo	ale L/I . Ci	editors with	Jilave	Unsecured	a Ciaiiiis	12/15
other party to a Form 106A/B) a claims that are	any executory contra and on <i>Schedule G:</i> listed in <i>Schedule L</i> tries in the boxes on	cts or unexpired leases Executory Contracts and C: Creditors Who Have C	that could res I Unexpired Le laims Secured	sult in a claim. Also list e eases (Official Form 106 I by Property. If more sp	executory contracts on S G). Do not include any cr ace is needed, copy the l	NPRIORITY claims. List the chedule A/B: Property (Official reditors with partially secured Part you need, fill it out, , write your name and case
Part 1:	List All of Your Pl	RIORITY Unsecured (Claims			
1. Do any c	reditors have priority	unsecured claims again	nst you?			
∑ Í No. G	o to Part 2.	_	-			
☐ Yes.						
Part 2:	List All of Your N	ONPRIORITY Unsecu	red Claims			
3. Do any c	reditors have nonpri	ority unsecured claims a	gainst you?			
☐ No. Yo	ou have nothing to rep	ort in this part. Submit this	form to the co	ourt with your other sched	ules.	
√ Yes		·		·		
nonpriorit included i	y unsecured claim, list	the creditor separately fo one creditor holds a partic	r each claim. F	or each claim listed, ident	olds each claim. If a credi ify what type of claim it is. I 3.If you have more than th	Do not list claims already
						Total claim
4.1 AMERI	CAN EXPRESS		Last 4 die	gits of account number	7 9 7 1	\$831.00
	ty Creditor's Name			g o		
•	•		When wa	s the debt incurred?	3/1/2017	
	X 981535					
Number	Street		A = = £ + b =	data waw fila tha alaim	:a. Chaal, all that annly	
				date you file, the claim	is: Check all that apply.	
EL PAS	SO, TX 79998-1535		Contir	•		
City	State	ZIP Code	Unliqu			
Who inc	urred the debt? Ched	ck one	Dispu	tea		
		SK Offe.	Type of N	IONPRIORITY unsecure	d claim:	
☑ Debt			☐ Stude			
☐ Debt	•	,			aration agreement or divor	ce that you did not report as
	or 1 and Debtor 2 only		•	y claims		,
	ast one of the debtors				ng plans, and other similar	debts
☐ Chec	k if this claim is for	a community debt	✓ Other.	. Specify Credit Card		
Is the cla	aim subject to offset	?				

Yes

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Pa	rt 2: Your NONPRIORITY Unsecured Claims -	- Continuation Page							
After	listing any entries on this page, number them beginnin	g with 4.4, followed by 4.5, and so fo	rth.						Total claim
4.2	AMERICAN EXPRESS Nonpriority Creditor's Name	Last 4 digits of account number	7	4		0	3		\$1,010.00
	PO BOX 981535 Number Street	When was the debt incurred?		10/2	20/	202	2		
	Number Street	As of the date you file, the claim is	s: Che	eck a	all t	hat a	apply.		
	EL PASO, TX 79998-1535 City State ZIP Code	☐ Contingent☐ Unliquidated☐ Disputed							
	Who incurred the debt? Check one. ☑ Debtor 1 only ☐ Debtor 2 only	Type of NONPRIORITY unsecured Student loans	claim	n:					
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt	 □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify Credit Card 					did not report as		
	Is the claim subject to offset? ☑ No □ Yes								
4.3	AMERICAN EXPRESS Nonpriority Creditor's Name	Last 4 digits of account number	2	0		0	7_		\$1,052.00
	PO BOX 981535	When was the debt incurred?							
	Number Street	As of the date you file, the claim is	s: Che	eck a	all t	hat a	apply.		
	EL PASO, TX 79998-1535 City State ZIP Code	- Unliquidated							
	Who incurred the debt? Check one. ✓ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? ✓ No □ Yes	 □ Disputed Type of NONPRIORITY unsecured □ Student loans □ Obligations arising out of a separ priority claims □ Debts to pension or profit-sharing ☑ Other. Specify Credit Card 	ration	agr					did not report as

Debtor 1 Eric Steven Document Page 27 of 77

Coker Case number (if known)

Last Name

Middle Name

First Name

Your NONPRIORITY Unsecured Claims - Continuation Page Part 2: After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. Total claim **AMERICAN EXPRESS** Last 4 digits of account number 3 0 0 7 \$3,063.00 Nonpriority Creditor's Name When was the debt incurred? PO BOX 981535 As of the date you file, the claim is: Check all that apply. Contingent **EL PASO, TX 79998-1535** ■ Unliquidated ZIP Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: **☑** Debtor 1 only ■ Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as ☐ Debtor 1 and Debtor 2 only priority claims ■ At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts lacksquare Check if this claim is for a community debt ☑ Other. Specify Business credit card Is the claim subject to offset? **☑** No ☐ Yes 4.5 AVANT / WEBBANK Last 4 digits of account number 3 6 8 \$1,162.00 Nonpriority Creditor's Name When was the debt incurred? 2/11/2019 222 N LA SALLE ST STE 1700 Number Street As of the date you file, the claim is: Check all that apply. Contingent CHICAGO, IL 60601-1101 Unliquidated ZIP Code State Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: **☑** Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as ☐ Debtor 1 and Debtor 2 only priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts ☐ Check if this claim is for a community debt ☑ Other. Specify Charge Account Is the claim subject to offset? **✓** No ☐ Yes

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Coker Case number (if known)

Last Name

	t 2: Your NONPRIORITY Unsecured Claims — listing any entries on this page, number them beginning	•
4.6	BMW FINANCIAL SERVICES	
	Nonpriority Creditor's Name	Last 4 digits of account number 9 3 2 1 \$1,137.00
	PO BOX 3608	When was the debt incurred?
	Number Street	
		As of the date you file, the claim is: Check all that apply.
	DUDUIN OH 42046 0206	Contingent
	DUBLIN, OH 43016-0306 City State ZIP Code	- Unliquidated
		☐ Disputed
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:
	Debtor 1 only	☐ Student loans
	Debtor 2 only	☐ Obligations arising out of a separation agreement or divorce that you did not report as
	☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another	priority claims
	☐ At least one of the dectors and another ☐ Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts
	— Check it this claim is for a community dept	Other. Specify Auto Ioan
	s the claim subject to offset?	
	√ No	
	Yes	
4.7	CAVALRY PORTFOLIO SERVICES	Last 4 digits of account numberunknown
	Nonpriority Creditor's Name	When was the debt incurred?
	500 SUMMIT LAKE DR STE 400	
	Number Street	As of the data conflict the claim in Observal all that such
		As of the date you file, the claim is: Check all that apply.
	VALHALLA, NY 10595-2321	Contingent Unliquidated
	City State ZIP Code	☐ Disputed
	Who incurred the debt? Check one.	·
	☑ Debtor 1 only	Type of NONPRIORITY unsecured claim:
	Debtor 2 only	☐ Student loans
	Debtor 1 and Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
	At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts
	☐ Check if this claim is for a community debt	Other. Specify
	Is the claim subject to offset?	
	√ No	

First Name

Middle Name

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First Name Middle Name Last Name

Coker Case number (if known)

Pa	rt 2: Your NONPRIORITY Unsecured Claims –	Continuation Page							
After	listing any entries on this page, number them beginning	g with 4.4, followed by 4.5, and so for	rth.						Total claim
4.8	CITIBANK / BEST BUY Nonpriority Creditor's Name PO BOX 790441 Number Street	Last 4 digits of account number When was the debt incurred?	0			1 202			\$1,148.00
	SAINT LOUIS, MO 63179-0441 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	As of the date you file, the claim is Contingent Unliquidated Disputed Type of NONPRIORITY unsecured Student loans Obligations arising out of a separ priority claims Debts to pension or profit-sharing Other. Specify Credit Card	claim ation a	า։ agı	reer	meni	t or div	•	t report as
4.9	CLINICAL PATHOLOGY LABORATORIES Nonpriority Creditor's Name PO BOX 141669 Number Street	Last 4 digits of account number When was the debt incurred?	5	2	2/20				\$52.00
	AUSTIN, TX 78714-1669 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?	As of the date you file, the claim is Contingent Unliquidated Disputed Type of NONPRIORITY unsecured Student loans Obligations arising out of a separ priority claims Debts to pension or profit-sharing Other. Specify Medical Service	claim ation a	า։ agı	reer	meni	t or div		t report as

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Coker Case number (if known)

Last Name

Middle Name

First Name

Part 2:	Your NONPRIORITY Uns	ecured Claims -	- Continuation Page					
After listing an	y entries on this page, num	ber them beginnin	ng with 4.4, followed by 4.5, and so fo	rth.	Total claim			
DISCOV	ER BANK		Last 4 digits of account number	\$15,392.00				
Nonpriority	Creditor's Name		When was the debt incurred?	10/11/2019				
РО ВОХ	30943			10/11/2019				
City Who incu Debtor Debtor At leas Check	•	ZIP Code	As of the date you file, the claim is Contingent Unliquidated Disputed Type of NONPRIORITY unsecured Student loans Obligations arising out of a separ priority claims Debts to pension or profit-sharing Other. Specify Credit Card	claim: ation agreement or divorce that y	ou did not report as			
4.11 EMORY	HEALTHCARE Creditor's Name 746699		Last 4 digits of account number When was the debt incurred?		\$200.00			
Number	Street		As of the date you file, the claim is: Check all that apply. Contingent Unliquidated					
ATLANT	A, GA 30374-6699							
City	State	ZIP Code	☐ Disputed					
Debtor Debtor Debtor Check			Type of NONPRIORITY unsecured ☐ Student loans ☐ Obligations arising out of a separ priority claims ☐ Debts to pension or profit-sharing ☑ Other. Specify Medical Service	ation agreement or divorce that y	ou did not report as			
☑ No ☐ Yes								

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Last Name

Pa	Your NONPRIORITY Unsecured Claims —	Continuation Page					
After	listing any entries on this page, number them beginning	g with 4.4, followed by 4.5, and so forth.	Total claim				
4.12	ENTERPRISE RENT-A-CAR Nonpriority Creditor's Name 2200 RENTAL CAR CNTR PKWY 2210 Number Street ATLANTA, GA 30337 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?	Last 4 digits of account number 4 1 2 1 When was the debt incurred? As of the date you file, the claim is: Check all that apply. □ Contingent □ Unliquidated ☑ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did no priority claims □ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify Car rental	unknown				
4.13	No Yes GEORGIA POWER Nonpriority Creditor's Name 96 ANNEX	Last 4 digits of account number 5 0 9 6 When was the debt incurred?	\$1,752.00				
	ATLANTA, GA 30396-0001 City State ZIP Code	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed					
	Who incurred the debt? Check one. ✓ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? ✓ No □ Yes	Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify Utility Service					

First Name

Middle Name

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Case nu

 Eric
 Steven
 Coker
 Case number (if known)

 First Name
 Middle Name
 Last Name

Pa	rt 2: Your NONPRIORITY Unsecured Claims –	Continuation Page					
After	listing any entries on this page, number them beginnin	g with 4.4, followed by 4.5, and so forth.	n				
4.14	GOLDMAN SACHS / APPLE CARD	Last 4 digits of account number 7 4 0 0 \$2,333.	\$2,333.00				
	Nonpriority Creditor's Name	When was the debt incurred? 4/30/2021					
	LOCKBOX 6112	<u> </u>					
	PO BOX 7247	As of the date you file, the claim is: Check all that apply.					
	Number Street	☐ Contingent					
	PHILADELPHIA, PA 19170-0001	- ☐ Unliquidated					
	City State ZIP Code	☐ Disputed					
	Who incurred the debt? Check one.	Time of NONDDIODITY unaccured alaims					
	☑ Debtor 1 only	Type of NONPRIORITY unsecured claim:					
	Debtor 2 only	Student loansObligations arising out of a separation agreement or divorce that you did not report as					
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts					
	☐ Check if this claim is for a community debt	☑ Other. Specify Credit Card					
	Is the claim subject to offset?						
	☑ No						
	☐ Yes						
4.15	NATIONWIDE MEDICAL	Last 4 digits of account number 9 5 7 8 \$451.	00				
	Nonpriority Creditor's Name	When were the debt in surred 0					
	5230 LAS VIRGENES ROAD	When was the debt incurred? 10-11/2024					
	Number Street						
		As of the date you file, the claim is: Check all that apply.					
	CALABASAS, CA 91302	☐ Contingent					
	City State ZIP Code	- ☐ Unliquidated ☐ Disputed					
	Who incurred the debt? Check one.	☐ Disputed					
	☑ Debtor 1 only	Type of NONPRIORITY unsecured claim:					
	☐ Debtor 2 only	☐ Student loans					
	☐ Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	☐ At least one of the debtors and another	□ Debts to pension or profit-sharing plans, and other similar debts					
	☐ Check if this claim is for a community debt	☑ Other. Specify Medical Services					
	Is the claim subject to offset?						
	☑ No						
	☐ Yes						

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Coker Case number (if known)

Last Name

First Name

Middle Name

Pa	rt 2: Your NONPRIORITY Unsecured Claims -	- Continuation Page				
Afte	listing any entries on this page, number them beginnin	ng with 4.4, followed by 4.5, and so forth.	Total claim			
4.16	PANOLA ENDOSCOPY CENTER Nonpriority Creditor's Name 5403 HILLANDALE PARK CT, STE A	Last 4 digits of account number 4 0 1 4 When was the debt incurred? 2024/2025	\$676.00			
	Number Street LITHONIA, GA 30058 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did no priority claims Debts to pension or profit-sharing plans, and other similar debts Medical Services	t report as			
4.17	RESURGEN ORTHOPEDICS Nonpriority Creditor's Name PO BOX 33000	Last 4 digits of account number 0 0 7 5 When was the debt incurred?	\$119.00			
	Number Street BELFAST, ME 04915-2062 City State ZIP Code	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed				
	Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? ✓ No	Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify Medical Services				

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Part 2:	Your NONPRIORITY Unsecured Claims —	Continuation Page			
After listin	g any entries on this page, number them beginning	g with 4.4, followed by 4.5, and so fo	rth.	Total claim	
Nonp	IOOLSFIRST FEDERAL CREDIT UNION riority Creditor's Name BOX 11547 per Street	Last 4 digits of account number 0 8 0 0 \$7 When was the debt incurred? 10/27/2015			
SAN City Who D D A	State ZIP Code incurred the debt? Check one. ebtor 1 only ebtor 2 only ebtor 1 and Debtor 2 only t least one of the debtors and another heck if this claim is for a community debt e claim subject to offset?	As of the date you file, the claim is Contingent Unliquidated Disputed Type of NONPRIORITY unsecured Student loans Obligations arising out of a separ priority claims Debts to pension or profit-sharing Other. Specify Line of credit	claim: ration agreement or divorce that yo	ou did not report as	
Nonp	IOOLSFIRST FEDERAL CREDIT UNION riority Creditor's Name BOX 11547 per Street	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is	0 0 0 6 3/14/2020 S: Check all that apply.	\$879.00	
City Who 1 D D A		 Contingent Unliquidated Disputed Type of NONPRIORITY unsecured Student loans Obligations arising out of a separ priority claims Debts to pension or profit-sharing ✓ Other. Specify Personal Loan 	claim: ration agreement or divorce that you	ou did not report as	

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Coker Case number (if known)

Last Name

Afte	r listing any entries on this page, number them begin	ning with 4.4, followed by 4.5, and so f	orth.	Total claim	
1.20	SCHOOLSFIRST FEDERAL CREDIT UNION	Last 4 digits of account number 8 4 3 9 When was the debt incurred? 3/13/2020	8 4 3 9	\$19,029.00	
	Nonpriority Creditor's Name		2/12/2020		
	PO BOX 11547	When was the debt incurred? 3/13/2020			
	Number Street	As of the date you file, the claim i	s: Check all that apply		
	SANTA ANA, CA 92711-1547	☐ Contingent			
	City State ZIP Cod	e Unliquidated Disputed			
	Who incurred the debt? Check one.	_ '			
	☑ Debtor 1 only		Type of NONPRIORITY unsecured claim: Student loans		
	☐ Debtor 2 only				
	☐ Debtor 1 and Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 			
	At least one of the debtors and another		Debts to pension or profit-sharing plans, and other similar debts		
	☐ Check if this claim is for a community debt	☑ Other. Specify Line of credit			
	Is the claim subject to offset?				
	☑ No				
	☐ Yes				
4.21	SYNCHRONY / SAMS CLUB	Last 4 digits of account number	0 4 9 4	\$117.00	
	Nonpriority Creditor's Name	NAME on the debt in some 40			
	PO BOX 71727	When was the debt incurred?	11/10/2019		
	Number Street				
		_ _	As of the date you file, the claim is: Check all that apply.		
	DIW ADEL DIWA DA 40470 4707				
	PHILADELPHIA, PA 19176-1727	Contingent			
	City State ZIP Cod	Unliquidated			
	,	— ☐ Unliquidated			
	City State ZIP Cod Who incurred the debt? Check one.	Unliquidated	claim:		
	City State ZIP Cod Who incurred the debt? Check one. ✓ Debtor 1 only	e Unliquidated Disputed	claim:		
	City State ZIP Cod Who incurred the debt? Check one.	Unliquidated Disputed Type of NONPRIORITY unsecured Student loans Obligations arising out of a sepa	claim:	ot report as	
	City State ZIP Cod Who incurred the debt? Check one. ✓ Debtor 1 only □ Debtor 2 only	☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans ☐ Obligations arising out of a sepa priority claims	ration agreement or divorce that you did no	ot report as	
	City State ZIP Cod Who incurred the debt? Check one. ✓ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only	Unliquidated Disputed Type of NONPRIORITY unsecured Student loans Obligations arising out of a sepa priority claims Debts to pension or profit-sharin	ration agreement or divorce that you did no	ot report as	
	City State ZIP Cod Who incurred the debt? Check one. ✓ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another	Unliquidated Disputed Type of NONPRIORITY unsecured Student loans Obligations arising out of a sepa priority claims Debts to pension or profit-sharin	ration agreement or divorce that you did no	ot report as	
	City State ZIP Cod Who incurred the debt? Check one. ✓ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt	Unliquidated Disputed Type of NONPRIORITY unsecured Student loans Obligations arising out of a sepa priority claims Debts to pension or profit-sharin	ration agreement or divorce that you did no	ot report as	

First Name

Middle Name

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Pa	rt 2: Your NONPRIORITY Unsecured C	laims –	- Continuation Page		
After	listing any entries on this page, number them	beginnin	g with 4.4, followed by 4.5, and so fo	rth.	Total claim
4.22	SYNCHRONY / VENMO Nonpriority Creditor's Name PO BOX 71737 Number Street PHILADELPHIA, PA 19176-1737		Last 4 digits of account number - When was the debt incurred?	0 3 1 4	\$9,547.00
				2/25/2020	
				3/25/2020	
			•		
			As of the date you file, the claim is: Check all that apply. Contingent		
		P Code	UnliquidatedDisputed		
	Who incurred the debt? Check one.		☐ Disputed		
	☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt		Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify Credit Card		
	Is the claim subject to offset?				
	☑ No				
	☐ Yes				
4.23	T-MOBILE		Last 4 digits of account number	9 2 2 0	\$400.00
	Nonpriority Creditor's Name P0 BOX 53410 Number Street		When was the debt incurred? 2025		
			As of the date you file, the claim is	: Check all that apply.	
	BELLEVUE, WA 98015-3410		☐ Contingent		
	City State ZI	P Code	- Unliquidated		
	Who incurred the debt? Check one.		☐ Disputed		
	✓ Debtor 1 only		Type of NONPRIORITY unsecured	claim:	
	□ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt		☐ Student loans		
			Obligations arising out of a separ	ation agreement or divorce that y	ou did not report as
			priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify Utility service / equipment		
	Is the claim subject to offset?		= 1 1,11) <u>U.I.I.J GOI VIOO</u>	· adarbinane	
	✓ No				
	Yes				
	— 103				

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Last Name

First Name

Middle Name

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. Total claim **UNITED DIGESTIVE** Last 4 digits of account number \$675.00 4 0 1 4 Nonpriority Creditor's Name When was the debt incurred? PO BOX 24893 Number As of the date you file, the claim is: Check all that apply. Contingent **NEW YORK, NY 10087-4893** Unliquidated State ZIP Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: **☑** Debtor 1 only ■ Student loans ☐ Debtor 2 only ☐ Obligations arising out of a separation agreement or divorce that you did not report as ☐ Debtor 1 and Debtor 2 only priority claims ■ At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts ☐ Check if this claim is for a community debt ☑ Other. Specify Medical Services Is the claim subject to offset? **☑** No ☐ Yes 4.25 US SMALL BUSINESS ADMINISTRATION Last 4 digits of account number 7 9 0 4 \$23,000.00 Nonpriority Creditor's Name When was the debt incurred? 312 N SPRING ST FL 5 Number Street As of the date you file, the claim is: Check all that apply. Contingent LOS ANGELES, CA 90012-4701 Unliquidated State ZIP Code City Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: **☑** Debtor 1 only ☐ Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as ☐ Debtor 1 and Debtor 2 only priority claims ■ At least one of the debtors and another ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Check if this claim is for a community debt ☑ Other. Specify Business Ioan Is the claim subject to offset? **☑** No ☐ Yes

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Part 2: Your NONPRIORITY Unsecured Claims —	Continuation Page			
After listing any entries on this page, number them beginning	g with 4.4, followed by 4.5, and so forth. Total claim			
4.26 ZYNEX MEDICAL Nonpriority Creditor's Name 9655 MAROON CIR Number Street	Last 4 digits of account number 0 5 9 5 \$437.00 When was the debt incurred?			
ENGLEWOOD, CO 80112-5914 City State ZIP Code	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed			
Who incurred the debt? Check one. ✓ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt	Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify Medical Services			
Is the claim subject to offset? ☑ No ☐ Yes				

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Debtor 1

 Eric
 Steven
 Coker
 Case number (if known) _

 First Name
 Middle Name
 Last Name

Part 4:	Add t	he Amounts for Each Type of Unsecured Claim								
6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.										
					Total claim					
Total claims from Part 1	6a.	Domestic support obligations	6a.		\$0.00					
nom rait i	6b.	Taxes and certain other debts you owe the government	6b.		\$0.00					
	6c.	Claims for death or personal injury while you were intoxicated	6c.		\$0.00					
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	+	\$0.00					
	6e.	Total. Add lines 6a through 6d.	6e.		\$0.00					
					Total claim					
Total claims from Part 2	6f.	Student loans	6f.		\$0.00					
HOIIIT AIT 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.		\$0.00					
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.		\$0.00					
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	+	\$85,222.00					
	6j.	Total. Add lines 6f through 6i.	6j.		\$85,222.00					

Fill in this inform	ation to identify your c	ase:		
Debtor 1	Eric	Steven	Coker	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States E	Bankruptcy Court for th	e: Central	District of California	
Case number				
(if known)				Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☑ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or con	npany with whom you have th	e contract or lease	State what the contract or lease is for
2.1				
	Name			
	Number	Street		
	City	State	ZIP Code	
2.2				
	Name			
	Number	Street		
	City	State	ZIP Code	
2.3				
	Name			
	Number	Street	_	
	City	State	ZIP Code	
2.4				
	Name			
	Number	Street		
	City	State	ZIP Code	

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Check if this is an
amended filing
10/15
12/15
married people are fill it out, and numbe
and case number (if
ll. A
nclude Arizona,
nciude Arizona,
nciude Arizona,
nciude Arizona,
s of that person.
s of that person. person shown in line
s of that person. person shown in line (Official Form 106D),
person shown in line (Official Form 106D), fill out Column 2.
s of that person. person shown in line (Official Form 106D),
person shown in line (Official Form 106D), fill out Column 2.
person shown in line (Official Form 106D), fill out Column 2.
person shown in line (Official Form 106D), fill out Column 2.

Official Form 106H Schedule H: Codebtors page 1 of 1

ZIP Code

ZIP Code

☐ Schedule D, line _____

☐ Schedule E/F, line _____

☐ Schedule G, line _

City

Name

Number

City

3.2

State

State

Street

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Fill in this inform	ation to identify you	ur case:			
Debtor 1	Eric	Steven	Coker		
	First Name	Middle Name	Last Name		_
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		Check if this is:
United States E	Bankruptcy Court fo	or the: Central	District of	California	An amended filingA supplement showing postp
Case number					13 income as of the following
(if known)					MM / DD / YYYY

Official Form 106I

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

	s form. On the top of any addition		iu case numb	21 (II KII	iowiij. Alisw	er every q	destion.		
	Part 1: Describe Employr	nent							
1.	Fill in your employment information.		Debtor 1				Debtor 2 or non-f	filing spo	ıse
	If you have more than one job, attach a separate page with information about additional employers.	Employment status	☐ Employe ☑ Not empl				☐ Employed ☐ Not employed		
	Include part-time, seasonal, or self-employed work.	Occupation							
	Occupation may include student or homemaker, if it applies.	Employer's name							
		Employer's address	Number	Street	:		Number Stree	et	
			City	Sta	ate Z	ZIP Code	City S	tate	ZIP Code
		How long employed there?			_				
	Part 2: Give Details Abou	it Monthly Income							
	Estimate monthly income as of unless you are separated.	the date you file this form. If	you have nothi	ng to re	port for any l	line, write \$	0 in the space. Include	e your non	-filing spouse
	If you or your non-filing spouse habelow. If you need more space, a			rmation	for all emplo	yers for tha	at person on the lines		
					For Del	btor 1	For Debtor 2 or non-filing spouse	•	
2.	List monthly gross wages, sala deductions). If not paid monthly, o			2.		\$0.00		<u> </u>	
3.	Estimate and list monthly over	time pay.		3	+	\$0.00	+	_	
4.	Calculate gross income. Add lin	ne 2 + line 3.		4.		\$0.00		.]	

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Debtor 1

 Eric
 Steven
 Coker
 Case number (if known)

 First Name
 Middle Name
 Last Name

				For Debtor 1	For Debtor 2 or non-filing spouse	
	Cop	y line 4 here→	4.	\$0.00		-
5.	List	all payroll deductions:				
		Tax, Medicare, and Social Security deductions	5a.	\$0.00		
	5b.	Mandatory contributions for retirement plans	5b.	\$0.00		
	5c.	Voluntary contributions for retirement plans	5c.	\$0.00		
	5d.	Required repayments of retirement fund loans	5d.	\$0.00		
	5e.	Insurance	5e.	\$0.00		
	5f.	Domestic support obligations	5f.	\$0.00		
	5g.	Union dues	5g.	\$0.00		
	5h.	Other deductions. Specify:	5h. +	\$0.00	+	
6.	Add	the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h.	6.	\$0.00		
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$0.00		
8.		all other income regularly received:				
	8a.	Net income from rental property and from operating a business, profession, or farm				
		Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$0.00		
	8b.	Interest and dividends	8b.	\$0.00		
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive				
		Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$0.00		
	8d.	Unemployment compensation	8d.	\$0.00		
	8e.	Social Security	8e.	\$0.00		
	8f.	Other government assistance that you regularly receive				
		Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.	01	\$0.00		
	_	Specify:	8f.	\$3,517.27		
	Ü	Pension or retirement income	8g.	\$0.00		
	8h.	Other monthly income. Specify:	8h. +		+	
9.	Add	1 all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9.	\$3,517.27		
10.		culate monthly income. Add line 7 + line 9. I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$3,517.27	+	= \$3,517.27
11.	Stat	e all other regular contributions to the expenses that you list in Schedu	ıle J.			
	frier	ude contributions from an unmarried partner, members of your household, youds or relatives.	·	.,		
	Do r	not include any amounts already included in lines 2-10 or amounts that are no	ot availa	able to pay expenses	listed in Schedule J.	#0.00
	Spe	cify:			11.	+ \$0.00

Page 44 of 77 Document Debtor 1 <u>Eric</u> Steven Coker Case number (if known) First Name Middle Name Last Name 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. \$3,517.27 12. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form? ☐ No. Yes. Explain: Debtor's son is living in the property and will start paying rent once he starts working.

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Doc 1

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Official Form 106l Schedule I: Your Income page 3

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Fill in this information	on to identify your case			
Debtor 1	Eric	Steven	Coker	Check if this is:
	First Name	Middle Name	Last Name	☐ An amended filing
Debtor 2				-
(Spouse, if filing)	First Name	Middle Name	Last Name	A supplement showing postpetition chapted expenses as of the following date:
United States Bankruptcy Court for the:		Central District of California		
Case number (if known)				MM / DD / YYYY

Official Form 106J

Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question

pace is needed, attach another sheet t	•	tional pages, write your name and ca	ise number (if Kn	own). Answer every quest
Part 1: Describe Your Househole Is this a joint case?	d			
No. Go to line 2.				
Yes. Does Debtor 2 live in a sep	parate household?			
	arate nousenous.			
Yes. Debtor 2 must file	Official Form 106J-2, Expenses for	Separate Household of Debtor 2.		
2. Do you have dependents?	\square_{No}			
Do not list Debtor 1 and Debtor 2.	Yes. Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
Do not state the dependents' names.	ioi eacii dependent	Child	38	. □ _{No.} ☑ _{Yes.}
				No. Yes.
			-	No. Yes.
				No. Yes.
			-	No. Yes.
Do your expenses include expenses of people other than yourself and your dependents?	☑ No □ _{Yes}			
art 2: Estimate Your Ongoing I		Lucing this form as a supplement in	Chapter 12 age	o to report expenses as a
stimate your expenses as of your bar ate after the bankruptcy is filed. If this				
nclude expenses paid for with non-ca uch assistance and have included it o			You	ur expenses
. The rental or home ownership exp for the ground or lot.	enses for your residence. Include t	first mortgage payments and any rent	4	\$2,525.00
				+=,=====
If not included in line 4:				+=,-=
If not included in line 4: 4a. Real estate taxes			4a	\$0.00
	ter's insurance		4a	
4a. Real estate taxes				\$0.00

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Debtor 1 Eric Steven Coker Case number (if known)

Last Name

First Name

Middle Name

First Name Middle Name Last Name		Our expenses					
		our expenses					
5. Additional mortgage payments for your residence, such as home equity loans	5	\$0.00					
5. Utilities:							
6a. Electricity, heat, natural gas	6a	\$150.00					
6b. Water, sewer, garbage collection	6b	\$50.00					
6c. Telephone, cell phone, Internet, satellite, and cable services	6c	\$120.00					
6d. Other. Specify:	6d.	\$0.00					
7. Food and housekeeping supplies	7	\$500.00					
3. Childcare and children's education costs	8	\$0.00					
Clothing, laundry, and dry cleaning	9.	\$0.00					
Personal care products and services	10.	\$50.00					
1. Medical and dental expenses	11.	\$0.00					
Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	10	\$0.00					
Do not include car payments.	12						
3. Entertainment, clubs, recreation, newspapers, magazines, and books	13	\$0.00					
4. Charitable contributions and religious donations	14	\$0.00					
Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.							
15a. Life insurance	15a.	\$0.00					
15b. Health insurance		\$0.00					
15c. Vehicle insurance	15c	\$0.00					
15d. Other insurance. Specify:	15d.	\$0.00					
		•					
 Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 	40	\$0.00					
Specify:	16.	φ0.00					
7. Installment or lease payments:		#0.00					
17a. Car payments for Vehicle 1	17a	\$0.00					
17b. Car payments for Vehicle 2	17b	\$0.00					
17c. Other. Specify:	17c	\$0.00					
17d. Other. Specify:	17d	\$0.00					
 Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 	18	\$0.00					
9. Other payments you make to support others who do not live with you.							
Specify:	19.	\$0.00					
0. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom	1e.						
20a. Mortgages on other property	20a	\$0.00					
20b. Real estate taxes	20b	\$0.00					
20c. Property, homeowner's, or renter's insurance	20c	\$0.00					
20d. Maintenance, repair, and upkeep expenses	20d.	\$0.00					
20e. Homeowner's association or condominium dues	20e.	\$0.00					

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Debtor 1		Eric	Steven Coker	Case number (if known,)	
		First Name	Middle Name	Last Name		
21.	Other. Spec	cify:		_	21. +	\$0.00
22.	Calculate y	our monthly expe	enses.			
	22a. Add lir	nes 4 through 21.			22a	\$3,730.00
	22b. Copy I	ine 22 (monthly e	xpenses for Debtor 2),	f any, from Official Form 106J-2	22b.	\$0.00
	22c. Add lin	ne 22a and 22b. T	he result is your month	y expenses.	22c	\$3,730.00
23.	Calculate y	our monthly net i	income.			
	23a. Copy I	ine 12 (your comb	oined monthly income) t	rom Schedule I.	23a. <u> </u>	\$3,517.27
	23b. Copy y	our monthly expe	enses from line 22c abo	ve.	23b	\$3,730.00
	23c. Subtra	ct your monthly e	xpenses from your mor	thly income.		
	The re	esult is your <i>montl</i>	hly net income.		23c	(\$212.73)
24.	For example	e, do you expect	to finish paying for your	penses within the year after you file car loan within the year or do you e of a modification to the terms of you	expect your	

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Fill in this information	n to identify your case:	:		
Debtor 1	Eric	Steven	Coker	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bank	ruptcy Court for the:	Cer	ntral District of California	1
Case number (if known)				

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your origin new <i>Summary</i> and check the box at the top of this page.	al forms, you must fill out a
Part 1: Summarize Your Assets	
	Your assets
	Value of what you own
1. Schedule A/B: Property (Official Form 106A/B)	
1a. Copy line 55, Total real estate, from Schedule A/B	\$650,000.00
1b. Copy line 62, Total personal property, from Schedule A/B	\$26,836.00
1c. Copy line 63, Total of all property on Schedule A/B	\$676,836.00
Part 2: Summarize Your Liabilities	
	Your liabilities
	Amount you owe
2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)	
2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$410,170.00
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)	¢0.00
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$0.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+\$85,222.00
Your total liabilities	\$495,392.00
Part 3: Summarize Your Income and Expenses	
4. Schedule I: Your Income (Official Form 106I)	
Copy your combined monthly income from line 12 of Schedule I	\$3,517.27
5. Schedule J: Your Expenses (Official Form 106J)	
Copy your monthly expenses from line 22c of Schedule J	\$3,730.00

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Debtor 1 Eric Steven Coker Case number (if known) ______

Part 4: Answer These Questions for Administrative and Statistical Records	
6. Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form	m to the court with your other schedules.
 7. What kind of debt do you have? ✓ Your debts are primarily consumer debts. Consumer debts are those "incurred by an ind family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purpose ✓ Your debts are not primarily consumer debts. You have nothing to report on this part of this form to the court with your other schedules. 	s. 28 U.S.C. § 159.
8. From the Statement of Your Current Monthly Income: Copy your total current monthly incom Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.	e from Official \$5,910.44
9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:	Total claim
From Part 4 on Schedule E/F, copy the following:	
9a. Domestic support obligations (Copy line 6a.)	\$0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	<u>\$0.00</u>
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0.00
9d. Student loans. (Copy line 6f.)	<u>\$0.00</u>
9e.Obligations arising out of a separation agreement or divorce that you did not report as pri claims. (Copy line 6g.)	ority \$0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$0.00_
9g. Total . Add lines 9a through 9f.	\$0.00

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Fill in this information	n to identify your case	:		
Debtor 1	Eric	Steven	Coker	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bank	ruptcy Court for the:	Cer	ntral District of Califo	rnia
Case number				
(if known)				

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is NOT an att	torney to help you till out bankruptcy forms?
☑ No	
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
Under penalty of perjury, I declare that I have read the selection of the	ummary and schedules filed with this declaration and that they are true and correct.

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Fill in this information	n to identify your case	:		
Debtor 1	_Eric	Steven	Coker	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bank	ruptcy Court for the:	Cer	ntral District of California	<u>ı</u>
Case number (if known)				

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/25

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

I. What is your cur ☐ Married ☑ Not married	rent marital status?				
□ No	years, have you lived anywhe				
Debtor 1:		Dates Debtor 1 lived there	Debtor 2:		Dates Debtor 2 lived there
45 Boynton Avnumber Street Atlanta, GA 30 City	ve Se Unit 1606 0315-1872 State ZIP Code	From 11/2023 To 2/2025	Same as Debtor 1 Number Street City	State ZIP Code	Same as Debtor 1 From To
Number Street		From To	Same as Debtor 1 Number Street		Same as Debtor 1 From To
City	State ZIP Code	_	City	State ZIP Code	_
erritories include A	years, did you ever live with a rizona, California, Idaho, Louisi re you fill out <i>Schedule H: Your</i>	ana, Nevada, New Mexico	, Puerto Rico, Texas, Wash		munity property states and

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tor 1		Steven	Coker		Case number (if kno	wn)
	First Name	Middle N				•
rt 2: Exp	plain the Sourc	es of Your I	Income			
						_
				usiness during this year or to sinesses, including part-time a		ears?
				ether, list it only once under D		
√ No						
T Vec Fi	ill in the details.					
103.11	iii iii tiic detaiis.					
			Debtor 1		Debtor 2	
			Sources of income	Gross Income	Sources of income	Gross Income
			Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions are exclusions)
rom lanı	uary 1 of current y	ear until the	☐ Wages, commissions	S,	☐ Wages, commissions,	
	filed for bankruptc		bonuses, tips		bonuses, tips	
			Operating a business	<u> </u>	Operating a business	
	alendar year:		☐ Wages, commissions bonuses, tips	S,	☐ Wages, commissions, bonuses, tips	
January 1	1 to December 31,	<u>2024</u>) YYYY	Operating a business	;	Operating a business	
		that:	☐ Wages, commissions	S,	☐ Wages, commissions,	
or the ca	alendar year before	, triat.				
	-		bonuses, tips		bonuses, tips	
(January 1	1 to December 31,	2023 YYYY	Operating a business		bonuses, tips Operating a business	
January 1 Did you relude incorolic benefi	eceive any other in me regardless of w it payments; pension	2023 YYYYY	Operating a business I this year or the two previocome is taxable. Example come; interest; dividends;	rious calendar years? es of other income are alimony money collected from lawsuits	Operating a business	
Did you re	eceive any other in me regardless of w it payments; pension	2023 YYYYY	Operating a business I this year or the two previocome is taxable. Example come; interest; dividends;	rious calendar years? es of other income are alimony	Operating a business	
Did you re lude incor blic benefing a joint o	eceive any other in me regardless of with payments; pensicase and you have	2023 YYYYY	Operating a business I this year or the two previocome is taxable. Example come; interest; dividends;	rious calendar years? es of other income are alimony money collected from lawsuits	Operating a business	
Did you re lude incor blic benefing a joint o	eceive any other in me regardless of w it payments; pension	2023 YYYYY	Operating a business I this year or the two previous is taxable. Example come; interest; dividends; byou received together, list	rious calendar years? es of other income are alimony money collected from lawsuits	Operating a business y; child support; Social Secues; royalties; and gambling a	
Did you re lude incor blic benefing a joint o	eceive any other in me regardless of with payments; pensicase and you have	2023 YYYYY	Operating a business I this year or the two previocome is taxable. Example come; interest; dividends;	rious calendar years? es of other income are alimony money collected from lawsuits	Operating a business	
Did you re lude incor blic benefing a joint o	eceive any other in me regardless of with payments; pensicase and you have	2023 YYYYY	Operating a business I this year or the two previous is taxable. Example come; interest; dividends; byou received together, list	rious calendar years? es of other income are alimony money collected from lawsuits	Operating a business y; child support; Social Secues; royalties; and gambling a	
Did you re lude incor blic benefing a joint o	eceive any other in me regardless of with payments; pensicase and you have	2023 YYYYY	Operating a business I this year or the two previous is taxable. Example come; interest; dividends; you received together, list Debtor 1 Sources of income	rious calendar years? es of other income are alimony money collected from lawsuits it only once under Debtor 1. Gross income from	Operating a business y; child support; Social Sections; royalties; and gambling a Debtor 2 Sources of income	nd lottery winnings. If your service of the service
Did you reclude incorblic benefing a joint of the Yes. Fi	eceive any other in me regardless of white payments; pension case and you have all in the details.	ncome during whether that in ons; rental income that y	Operating a business I this year or the two previous is taxable. Example come; interest; dividends; you received together, list Debtor 1 Sources of income	rious calendar years? es of other income are alimony money collected from lawsuits it only once under Debtor 1. Gross income from each source (before deductions and	Operating a business y; child support; Social Sections; royalties; and gambling a Debtor 2 Sources of income	Gross Income from each source (before deductions ar
Did you relude incorollic benefig a joint of Yes. Fi	eceive any other in me regardless of white payments; pension case and you have all in the details.	ncome during whether that in ons; rental income that y	Operating a business I this year or the two previous is taxable. Example come; interest; dividends; lyou received together, list Debtor 1 Sources of income Describe below.	rious calendar years? es of other income are alimony money collected from lawsuits it only once under Debtor 1. Gross income from each source (before deductions and exclusions)	Operating a business y; child support; Social Sections; royalties; and gambling a Debtor 2 Sources of income	Gross Income from each source (before deductions at
Did you relude incololic benefing a joint of the Yes. Fi	eceive any other in me regardless of white payments; pension case and you have all in the details.	ncome during whether that in ons; rental income that y	Operating a business I this year or the two previous is taxable. Example come; interest; dividends; you received together, list Debtor 1 Sources of income Describe below. Rental income Pension	Gross income from each source (before deductions and exclusions) \$\frac{\text{Gross income from each source}}{\text{\$5,757.00}}\$	Operating a business y; child support; Social Sections; royalties; and gambling a Debtor 2 Sources of income	Gross Income from each source (before deductions as
Did you relude incorplic benefing a joint of the point of	eceive any other in me regardless of with payments; pensicase and you have all in the details.	ncome during whether that in ons; rental income that y income that y ear until the y:	Debtor 1 Sources of income Describe below. Rental income Pension	Gross income from each source (before deductions) \$5,757.00 \$14,061.00	Operating a business y; child support; Social Sections; royalties; and gambling a Debtor 2 Sources of income	Gross Income from each source (before deductions as
Did you relude incorplic benefing a joint of the Yes. Firm Januare you for last care	eceive any other in me regardless of white payments; pension case and you have all in the details.	ncome during whether that in ons; rental income that y income that y ear until the y:	Operating a business I this year or the two previous is taxable. Example come; interest; dividends; you received together, list Debtor 1 Sources of income Describe below. Rental income Pension	Gross income from each source (before deductions and exclusions) \$\frac{\text{Gross income from each source}}{\text{\$5,757.00}}\$	Operating a business y; child support; Social Sections; royalties; and gambling a Debtor 2 Sources of income	Gross Income from each source (before deductions as
Did you relude incorplic benefing a joint of the point of	eceive any other in me regardless of with payments; pensicase and you have all in the details.	ncome during thether that in ons; rental income that y income that y ear until the y:	Debtor 1 Sources of income Describe below. Rental income Pension	Gross income from each source (before deductions) \$5,757.00 \$14,061.00	Operating a business y; child support; Social Sections; royalties; and gambling a Debtor 2 Sources of income	Gross Income from each source (before deductions as
Did you relude incorplic benefing a joint of the call	eceive any other in me regardless of white payments; pensicase and you have all in the details. uary 1 of current y filed for bankruptc allendar year: 1 to December 31,	ear until the y:	Operating a business I this year or the two previous is taxable. Example come; interest; dividends; you received together, list Debtor 1 Sources of income Describe below. Rental income Pension Rental income	Gross income from each source (before deductions and exclusions) \$5,757.00	Operating a business y; child support; Social Sections; royalties; and gambling a Debtor 2 Sources of income	Gross Income from each source (before deductions as

Document Page 53 of 77 Debtor 1 Eric Steven Coker Case number (if known) _ First Name Last Name Middle Name List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$8,575* or more? No. Go to line 7. ☐ Yes. List below each creditor to whom you paid a total of \$8,575* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/28 and every 3 years after that for cases filed on or after the date of adjustment. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. ☑ Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Total amount paid Amount you still owe Was this payment for... Dates of payment ■ Mortgage **SchoolsFirst Federal Credit** Monthly \$1,843.00 \$42,434.00 Union **√** Car Creditor's Name ☐ Credit card PO Box 11547 Loan repayment Number Street ☐ Suppliers or vendors Santa Ana, CA 92711-1547 City State ZIP Code Other — **✓** Mortgage Monthly \$5,223.00 \$341,028.00 Freedom Mortgage Creditor's Name ☐ Car PO Box 619063 ☐ Credit card Number Street Loan repayment Dallas, TX 75261-9063 ☐ Suppliers or vendors State ZIP Code Other _ 7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. **✓** No Yes. List all payments to an insider.

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otor 1	Eric	Steven	Coker		Case	number (if know	n)
	First Name	Middle Name	Last Name				
			Dates of payment	Total amount paid	Amount you still owe	Reason for the	his payment
nsider's N	lame						
Number	Street						
City	State	ZIP Code					
	year before you file ments on debts gua			payments or transfer	any property on acco	ount of a debt th	at benefited an insider
Yes. L	ist all payments tha	t benefited an insi	ider.				
			Dates of payment	Total amount paid	Amount you still owe	Reason for the Include credit	
Insider's N	lame						
Number	Street						
City	State	ZIP Code					
rt 4: Id	lentify Legal Act	ions, Reposse	ssions, and Fored	closures			
	n matters, including			any lawsuit, court actions, divorces, collec			custody modifications,
Yes. F	Fill in the details.						
		Na	ture of the case	Cou	rt or agency		Status of the case
							Pending
Case title	-			Court	Name	_	On appeal
				Court			•
	mber					ate ZIP Code	☐ On appeal

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		Steven	Coker	Case number (if known)	
	First Name	Middle Name	Last Name	•	
	ear before you fil apply and fill in the		was any of your property repossesse	d, foreclosed, garnished, attached, seized, or levied?	
☑ No. Go t	o line 11.				
Yes. Fill	in the information	below.			
			Describe the property	Date Value of the pro	perty
					. ,
Creditor's Nan	ne				
Number S	Street		Explain what happened		
			Property was repossessed		
			Property was foreclosed. Property was garnished.		
Oit.	04-	710.0-1-	Property was attached, sei	zed or levied	
City	Sta	ite ZIP Code	Troporty was attached, son	204, 01 10 110 4.	
Yes. Fill	in the details.				
			Describe the action the creditor tool		
Creditor's Nan	me			taken	
Number S	Street				
Number S	Street	e ZIP Code	Last 4 digits of account number: XXXX		
City 2. Within 1 y	State	led for bankruptcy	was any of your property in the posse	ession of an assignee for the benefit of creditors, a court-	
City 2. Within 1 y	State		was any of your property in the posse		
City 2. Within 1 y popointed rec	State	led for bankruptcy	was any of your property in the posse		
City 2. Within 1 y	State	led for bankruptcy	was any of your property in the posse		
2. Within 1 yppointed rec	State ear before you fil ceiver, a custodia	led for bankruptcy n, or another offic	was any of your property in the posso		
2. Within 1 yppointed rec	State ear before you fil ceiver, a custodia	led for bankruptcy	was any of your property in the posso		
City 2. Within 1 y popointed record No Yes Tt 5: List	State ear before you fil ceiver, a custodia Certain Gifts	led for bankruptcy in, or another offic and Contributio	was any of your property in the posso	ession of an assignee for the benefit of creditors, a court-	
City 2. Within 1 y popointed record No Yes Tt 5: List 3. Within 2 y	State ear before you fil ceiver, a custodia Certain Gifts	led for bankruptcy in, or another offic and Contributio	was any of your property in the posso	ession of an assignee for the benefit of creditors, a court-	
City 2. Within 1 y popointed record No Yes T 5: List 3. Within 2 y	ear before you fil ceiver, a custodia Certain Gifts a	led for bankruptcy, in, or another office and Contribution filed for bankruptc	was any of your property in the posso	ession of an assignee for the benefit of creditors, a court-	
City 2. Within 1 y popointed recommod No Yes The State of the State	State ear before you fil ceiver, a custodia Certain Gifts	led for bankruptcy, in, or another office and Contribution filed for bankruptc	was any of your property in the posso	ession of an assignee for the benefit of creditors, a court-	
City 2. Within 1 y popointed recommod No Yes The State of the State	ear before you fil ceiver, a custodia Certain Gifts a	led for bankruptcy, in, or another office and Contribution filed for bankruptc	was any of your property in the posso	ession of an assignee for the benefit of creditors, a court-	
City 2. Within 1 y popointed recommod No Yes The State of the State	ear before you fil ceiver, a custodia Certain Gifts a	led for bankruptcy, in, or another office and Contribution filed for bankruptc	was any of your property in the posso	ession of an assignee for the benefit of creditors, a court-	

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First Nat Gifts with a total va per person Person to Whom You G Number Street	lue of more than	\$600 Desc	Last Name cribe the gifts		Dates you gave the gifts	Value
per person Person to Whom You G Number Street		\$600 Desc	ribe the gifts			Value
lumber Street	ave the Gift					
umber Street	ave the Gift					
tv						
	State ZIP	Code				
erson's relationship	to you					
Within 2 years befo	ore you filed for b	ankruptcy, did y	you give any gifts or o	contributions with a total v	alue of more than \$600	to any charity?
1 No						
Yes. Fill in the det	tails for each gift o	or contribution.				
Gifts or contributio		Describe wh	at you contributed		Date you	Value
that total more thar	n \$600				contributed	
harity's Name						
_						
Number Street						
dinsor Guest						
ity	State ZIP Code					
,	2 0000					
t 6: List Certain	Losses					
With in A b . fa.			and the second second			
within 1 year before the strong t	re you filed for ba	inkruptcy or sind	ce you filed for bankr	uptcy, did you lose anythir	ig because of theit, fir	e, other disaster, or
∕ INo						
Yes. Fill in the det	tails.					
Describe the prope	rtv vou lost and	Describe any i	nsurance coverage fo	or the loss	Date of your loss	Value of property lost
how the loss occur			ount that insurance ha		,	,
now the loss occur			ns on line 33 of Sched			
HOW THE IOSS OCCUP		insurance claim				
now the loss occur		insurance claim				

Debtor 1 Eric Steven Coker Case number (if known) _ First Name Middle Name Last Name Part 7: List Certain Payments or Transfers 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. □No Yes. Fill in the details. Description and value of any property transferred Amount of payment Date payment or transfer was made **Nexus Bankruptcy** Person Who Was Paid Attorney's fees, filing fee 3/2025 \$1,938.00 3090 Bristol Street #400 Number Street Costa Mesa, CA 92626 ZIP Code State ben@nexusbk.com Email or website address Person Who Made the Payment, if Not You 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. **√**No ☐ Yes. Fill in the details. Description and value of any property transferred Amount of payment Date payment or transfer was made Person Who Was Paid Number Street City State ZIP Code 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. **√** No Yes. Fill in the details.

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		Steven	Coker		Case number (if known)	
	First Name	Middle Name	Last Name			
		Descript transfer	ion and value of property ed	Describe any proper received or debts p		Date transfer was made
erson Who R	Received Transfer				_	
umber St	treet					
ity	State ZIF	² Code				
erson's rela	ationship to you					
nese are ofte ✓ No	years before you fi en called asset-pro n the details.		, did you transfer any prop	erty to a self-settled trust	or similar device of which	you are a beneficia
		Danavint				Date transfer was
		Descript	ion and value of the prope	rty transferred		made
lame of trus	st	Descript	ion and value of the prope	rty transferred		made
	st Certain Financi:		struments, Safe Depos			made
t 8: List (Within 1 ye transferred d lude checkinds, coopera ✓ No	Certain Financi. ear before you filed ng, savings, money tives, associations	al Accounts, Ind	struments, Safe Depos ere any financial accounts nancial accounts; certificate	it Boxes, and Storage or instruments held in yo	e Units our name, or for your bene	fit, closed, sold, mo
Within 1 ye transferred clude checkinds, coopera	Certain Financi ear before you filed ? ng, savings, money	al Accounts, Ins	struments, Safe Depos ere any financial accounts nancial accounts; certificate	it Boxes, and Storage or instruments held in yo	e Units our name, or for your bene	fit, closed, sold, mo
Within 1 ye ransferred ude checkinds, coopera	Certain Financi. ear before you filed ng, savings, money tives, associations	al Accounts, Ins	struments, Safe Depos ere any financial accounts nancial accounts; certificate Il institutions.	it Boxes, and Storage or instruments held in your soft deposit; shares in bar	e Units our name, or for your bene nks, credit unions, brokerag	fit, closed, sold, moge houses, pension Last balance
Within 1 ye rransferred' lude checkinds, cooperad No	Certain Financi. ear before you filed ng, savings, money tives, associations	al Accounts, Ins	struments, Safe Depos ere any financial accounts nancial accounts; certificate Il institutions.	it Boxes, and Storage or instruments held in your sof deposit; shares in bar Type of account or instrument Checking	e Units our name, or for your bene nks, credit unions, brokerag Date account was closed, sold, moved, or	fit, closed, sold, mo ge houses, pension Last balance before closing or
Within 1 ye transferred' lude checkir ds, coopera No	Certain Financia ear before you filed? ng, savings, money attives, associations on the details.	al Accounts, Ins	struments, Safe Depos rere any financial accounts nancial accounts; certificate il institutions.	it Boxes, and Storage or instruments held in your soft deposit; shares in bare Type of account or instrument Checking Savings Money market	e Units our name, or for your bene nks, credit unions, brokerag Date account was closed, sold, moved, or	fit, closed, sold, mo ge houses, pension Last balance before closing or
Within 1 ye transferred' lude checkinds, cooperated No	Certain Financia ar before you filed? ng, savings, money trives, associations in the details.	al Accounts, Ins	struments, Safe Depos rere any financial accounts nancial accounts; certificate il institutions.	it Boxes, and Storage or instruments held in you s of deposit; shares in bar Type of account or instrument Checking Savings	e Units our name, or for your bene nks, credit unions, brokerag Date account was closed, sold, moved, or	fit, closed, sold, mo ge houses, pension Last balance before closing or

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		Steven	С			Case number (if	Kriowri)
	First Name	Middle Na	me La	ast Name			
			Who else had a	access to it?	Describe	the contents	Do you still have it?
							□No
lame of Fir	nancial Institution		lame				Yes
Number	Street		lumber Street				
		 -	ity	State ZIP	Code		
			,	Otato Lii			
City	State 2	ZIP Code					
Have you	u stored property i	n a storage ur	nit or place othe	er than your hor	me within 1 year before	you filed for bankrup	tcy?
√ No							
☐ Yes. Fi	II in the details.						
			Who else has o	or had access to	Describe	the contents	Do you still have it?
							□No
Name of Sto	orage Facility	N	lame				Yes
Number	Street	N	lumber Street				
Number	Street	N	lumber Street				
Number	Street		lumber Street		Code		
					Code		
		ō			Code		
City	State 2	ZIP Code	City	State ZIP			
City		ZIP Code	City	State ZIP			
City	State 2	ZIP Code You Hold or	Control for S	State ZIP	3	nwed from are storing	for or hold in trust for some
City Tt 9: Ide	State 2	ZIP Code You Hold or	Control for S	State ZIP	3	owed from, are storing	for, or hold in trust for some
City Tt 9: Ide . Do you h √INo	State 2 entify Property N	ZIP Code You Hold or	Control for S	State ZIP	3	owed from, are storing	for, or hold in trust for some
City Tt 9: Ide . Do you h √INo	State 2	ZIP Code You Hold or	Control for S	State ZIP	3	owed from, are storing	for, or hold in trust for some
City Tt 9: Ide . Do you h √INo	State 2 entify Property N	ZIP Code You Hold or property that	Control for S	State ZIP omeone Else owns? Include	any property you borro	owed from, are storing the property	for, or hold in trust for some
City rt 9: Ide . Do you h √INo	State 2 entify Property N	ZIP Code You Hold or property that	Control for S	State ZIP omeone Else owns? Include	any property you borro		
City Tt 9: Ide . Do you h ☑ No ☑ Yes. Fil	State and the st	ZIP Code You Hold or property that	Control for S someone else Where is the pr	State ZIP omeone Else owns? Include	any property you borro		
City Tt 9: Ide . Do you h ✓ No ☐ Yes. Fil	State and the st	ZIP Code You Hold or property that	Control for S	State ZIP omeone Else owns? Include	any property you borro		
City Tt 9: Ide Do you h MY No Yes. Fil	State and state	ZIP Code You Hold or property that	Control for S someone else Where is the pr	State ZIP omeone Else owns? Include	any property you borro		
City Tt 9: Ide Do you h M No Yes. Fil	State and the st	ZIP Code You Hold or property that	Control for S someone else Where is the pr	State ZIP omeone Else owns? Include	any property you borro		
City Tt 9: Ide Do you h M No Yes. Fil	State and state	ZIP Code You Hold or property that	Control for S someone else Where is the pr	State ZIP omeone Else owns? Include	any property you borro		
City Tt 9: Ide Do you h M No Yes. Fil	State and state	ZIP Code You Hold or property that	Control for S someone else Where is the pr	State ZIP omeone Else owns? Include	any property you borro		
City rt 9: Ide 3. Do you h	State and state	ZIP Code You Hold or property that	Control for S someone else Where is the pr	State ZIP omeone Else owns? Include	any property you borro		
City Ide Do you h No Yes. Fil	State and state	ZIP Code /ou Hold or property that	Control for S someone else Where is the pr	State ZIP omeone Else owns? Include	any property you borro		

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btor 1	Eric	Steven	Coker	Case number (if k	nown)
	First Name	Middle Name	Last Name		
art 10: Gi	ve Details Ab	out Environmental	Information		
For the nurn	ose of Part 10. tl	ne following definitions	s anniv		
■ Environn	mental law means ces, wastes, or m	s any federal, state, or I	ocal statute or regulation, soil, surface water, gro	n concerning pollution, contamination, releases undwater, or other medium, including statutes o	
	ans any location, it, including disp		lefined under any enviro	nmental law, whether you now own, operate, or	utilize it or used to own, operat
	us material mear , contaminant, or		nental law defines as a h	nazardous waste, hazardous substance, toxic su	ubstance, hazardous material,
Report all no	otices, releases,	and proceedings that y	ou know about, regard	less of when they occurred.	
4. Has any	governmental ur	nit notified you that you	u may be liable or poten	ntially liable under or in violation of an environ	mental law?
√ No					
☐ Yes. Fil	I in the details.				
		Cayann	mental unit	Environmental law if you know it	Date of notice
		Govern	mentai unit	Environmental law, if you know it	Date of notice
Name of site	e	Governme	ental unit		
Number	Street	Number	Street	_	
		City	State ZIP Code	_	
City	State	ZIP Code			
	notified any go	vernmental unit of any	release of hazardous n	naterial?	
√ No					
Yes. Fill	I in the details.				
		Govern	mental unit	Environmental law, if you know it	Date of notice
Name of site	9	Governme	ental unit		

26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

State ZIP Code

City

√No

City

 \square Yes. Fill in the details.

State

ZIP Code

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btor 1	Eric	Steven	Coke			Case number (if	known)
	First Name	Middle Name	Last Na	ame			
		Court	or agency		Nature of the c	ase	Status of the case
Case title		Court Na	ame				Pending
							☐ On appeal☐ Concluded
		Number	Street				Concluded
Case numb	per	City	State	ZIP Code			
7. Within 4 A : 1 A :	years before you sole proprietor or s member of a limite partner in a partne	self-employed in a tra d liability company (l rship	, did you own a ade, profession LLC) or limited	a business or , or other activ liability partne	have any of the fol	lowing connections to a	any business?
√ Ar	n officer, director, o	r managing executiv	e of a corporat	ion			
√ Ar	n owner of at least	5% of the voting or e	equity securities	s of a corporati	on		
☐ No. No	one of the above ap	oplies. Go to Part 12.					
√ Yes. Cl	heck all that apply	above and fill in the	details below for	or each busine	SS.		
	ker Productions	Desc	ribe the nature	of the busine	ss	Employer Identification Do not include Social S	n number Security number or ITIN.
Name		Enter	rtainment co	mpany		EIN: <u>8</u> 8 - <u>2</u> 6	9 6 6 6 7
21698 C	andela Dr	Name	e of accountan	t or bookkeep	er	Dates business existed	d
Number	Street	0.0527				From <u>12/15/2021</u>	Го
Santa C City	larita, CA 91350 State	ZIP Code					
Emman	uel Church of J	Desc esus,	ribe the nature	of the busine	ss	Employer Identification	n number Security number or ITIN.
	ic Faith, Inc.		profit church	1		EIN: 2 2 - 2 2	•
		Name	e of accountan	t or bookkeep	er	Dates business existed	d
	Street					F 40/40/4070	
Number	Street					From <u>10/13/1970</u>	10

Santa Clarita, CA 91350-8537

State ZIP Code

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ebtor 1	Eric	Steven	Coker	Case number (if known)
	First Name	Middle Name	Last Name	
	ty Film Collabora	Descri	be the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
LLC Name		Entert	ainment company	EIN: <u>8 2 - 3 5 6 9 8 0 4</u>
		Name	of accountant or bookkeeper	Dates business existed
Number	Candela Dr Street			From <u>11/30/2017</u> To
Santa C	Clarita, CA 91350 State	-8537 ZIP Code		
Advanc	ce Film, Inc.	Descri	be the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
Name		Entert	ainment company	EIN: <u>2 6 - 4 1 3 8 5 9 3</u>
21698 0	Candela Dr	Name	of accountant or bookkeeper	Dates business existed
Number Santa C	Street Clarita, CA 91350	-8537		From <u>1/28/2009</u> To <u>12/7/2016</u>
City		ZIP Code		
reditors, o	2 years before you to other parties.			to anyone about your business? Include all financial institutions,
		Date is		
Name		MM / DD	/YYYY	
Number	Street			

City

State

ZIP Code

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Debtor 1	Eric	Steven	Coker	Case number (if known)
	First Name	Middle Name	Last Name	

Part 12: Sign Below	
I have read the answers on this <i>Statement of Financial Affairs</i> and any attachments, and and correct. I understand that making a false statement, concealing property, or obtainin bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or	ng money or property by fraud in connection with a
Signature of Eric Steven Coker, Debtor 1	
Date <u>04/29/2025</u>	
Did you attach additional pages to your Statement of Financial Affairs for Individuals Fili	ing for Bankruptcy (Official Form 107)?
☑ No	
□Yes	
Did you pay or agree to pay someone who is not an attorney to help you fill out bankrup	tcy forms?
✓No	
☐ Yes. Name of person	Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Fill in this information	Fill in this information to identify your case:							
Debtor 1	Eric	Steven	Coker					
	First Name	Middle Name	Last Name					
Debtor 2								
(Spouse, if filing)	First Name	Middle Name	Last Name					
United States Bankr	ruptcy Court for the:	Cer	ntral District of	California				
Case number (if known)								

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

For any creditor below.	rs that you listed in Part 1 of Schedule D: C	reditors Who Have Claims Secured by Property (Official Form	106D), fill in the information	
Identify the creditor and the property that is collateral		What do you intend to do with the property that secures Did you claim the a debt? exempt on Sched		
Creditor's		☐ Surrender the property.	☐ No	
name:	Freedom Mortgage	Retain the property and redeem it.	√ Yes	
Description of property securing debt:	21698 Candela Dr Santa Clarita, CA 91350-8537	Retain the property and enter into a Reaffirmation Agreement.		
		✓ Retain the property and [explain]: Continue making payments		
Creditor's		☐ Surrender the property.	☐ No	
name:	US Department of HUD	Retain the property and redeem it.	√ Yes	
Description of property securing debt:	21698 Candela Dr Santa Clarita, CA 91350-8537	Retain the property and enter into a Reaffirmation Agreement.	-	
accurring debt.		Retain the property and [explain]: Pay pursuant to contract		

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Debtor 1	Eric	Steven	Coker	Case number (if known)		
	First Name	Middle Name	Last Name	, , , , , , , , , , , , , , , , , , , ,		
Addition	al Page for Pa	art 1				
Creditor's name:	SchoolsFirs	t Federal Credit Union	Surrender the property.	☐ No ☑ Yes		
Description of property securing debt:	2022 Tesla Model Y		Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement.			
scouning debt.			Retain the property and [explain]:			

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	Variable	I Damagad During	Lancas	
	•	l Personal Property		
rmation be	elow. Do not list rea	al estate leases. Unexp		racts and Unexpired Leases (Official Form 106G), fill in the in effect; the lease period has not yet ended. You may assume a
Describe y	our unexpired pers	sonal property leases		Will the lease be assumed?
Lessor's nai	me:			☐ No
Description property:	of leased			☐ Yes
Lessor's na	me:			☐ No
Description property:	of leased			☐ Yes
Lessor's nai	me:			☐ No
Description property:	of leased			☐ Yes
_essor's nai	me:			☐ No
Description property:	of leased			☐ Yes
Lessor's nai	me:			□ No
Description property:	of leased			☐ Yes
_essor's nai	me:			☐ No
Description property:	of leased			☐ Yes
Lessor's nai	me:			☐ No
Description property:	of leased			☐ Yes
t 3: Sign	n Below			
		and the till serve !	d muchiniansters at any	and the state of t
nder penal	اty of perjury, I decl الا is subject	are that I have indicate nexpired lease.	d my intention about any property	of my estate that secures a debt and any personal

Date 04/29/2025

MM/ DD/ YYYY

Fill	in this information	to identify your case:					4/3	Check one bo	x only as directed in th	s form and in
D	ebtor 1	Eric	Steven	Coker				_	• • • • • • • • • • • • • • • • • • • •	
D.		First Name	Middle Name	Last Name				✓ 1. There is	no presumption of abu	ise.
	ebtor 2 pouse, if filing)	- E - N	ACT III AT	1				of abuse a	culation to determine if pplies will be made und	der Chapter 7
•	-	First Name	Middle Name	Last Name					st Calculation (Official F	,
	nited States Bankru ase number	uptcy Court for the:	Cen	tral District o	of California	1	-		ans Test does not apply I military service but it o	
_	known)							☐ Check if the	nis is an amended filing	
Of	ficial Form	122A-1								
Cr	napter 7 S	Statement	of Your	Curren ⁻	t Mont	hly I	nco	me		12/19
attac and oeca with	ch a separate shee case number (if kn ause of qualifying r this form.	t to this form. Includ nown). If you believe	e the line number that you are exen plete and file <i>Sta</i>	to which the another to the top the to	additional inf resumption	ormation of abuse b	applies because	s. On the top of e you do not ha	ing accurate. If more s any additional pages, ave primarily consume 707(b)(2) (Official Forn	write your name r debts or
1.		ital and filing status?								
	_	ill out Column A, lines								
	_	our spouse is filing w	•			2-11.				
		our spouse is NOT fil he same household :	-			· - I	ID II	0 44		
	_			-					ng this box, you declare	
	under per	nalty of perjury that your re living apart for reas	ou and your spous	se are legally se	eparated und	ler nonbar	nkruptcy	/ law that applie	es or that you and your	
10 va ex	01(10A). For examparied during the 6 m	ole, if you are filing on nonths, add the incom	n September 15, the for all 6 months	ne 6-month per and divide the	iod would be total by 6. F	March 1 till in the re	through esult. Do	August 31. If the not include an	le this bankruptcy cas ne amount of your mont y income amount more re nothing to report for	thly income than once. For
							Colu Deb t	ımn A tor 1	Column B Debtor 2 or non-filing spouse	
2.	Your gross wages deductions).	s, salary, tips, bonus	es, overtime, and	commissions	(before all page	ayroll		\$0.00		
3.	Alimony and mair is filled in.	ntenance payments.	Do not include pa	yments from a	spouse if Co	lumn B		\$0.00		
4.	your dependents, unmarried partner roommates. Include	any source which and including child support, members of your holder regular contribution ents you listed on line	port. Include reguousehold, your depons from a spouse	lar contribution pendents, pare	s from an nts, and			\$0.00		
5.	Net income from or farm	operating a business	s, profession,	Debtor 1	Debtor 2					
	Gross receipts (be	efore all deductions)		\$0.00						
	Ordinary and nece	essary operating expe	enses	- \$0.00						
	Net monthly incom	ne from a business, p	profession, or farm	\$0.00		Copy here →		\$0.00		
6.	Net income from	rental and other real	property	Debtor 1	Debtor 2					
	Gross receipts (be	efore all deductions)		\$2,579.16	200.0.2					
	Ordinary and nece	essary operating expe	enses	- \$180.54	-					
				\$2,398.62		Сору				
	Net monthly incom	ne from rental or othe	er real property			here →		\$2,398.62	_	
7.	Interest, dividend	s, and royalties						\$0.00		

Filed 04/30/25 :25-bk-13578 Steven Entered 04/30/25 11:12:23 Doc 1 Debtor 1 Page 68 of 77 Case number (if known). Column A Column B Debtor 1 Debtor 2 or non-filing spouse 8. Unemployment compensation \$0.00 Do not enter the amount if you contend that the amount received was a benefit For you..... \$0.00 For your spouse..... 9. Pension or retirement income. Do not include any amount received that was a \$3,511.82 benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled if retired under any provision of title 10 other than chapter 61 of that title. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act; payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below. Total amounts from separate pages, if any. \$5,910.44 \$5,910.44 11. Calculate your total current monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B. **Total current** monthly income Determine Whether the Means Test Applies to You 12. Calculate your current monthly income for the year. Follow these steps: 12a. Copy your total current monthly income from line 11..... Copy line 11 here \$5,910.44 Multiply by 12 (the number of months in a year). x 12 12b. The result is your annual income for this part of the form. \$70,925.28 12b

14.	How	do the l	ines	compa	are?
	14a	☑ Line	12h	is less	than

Fill in the state in which you live.

Fill in the number of people in your household.

s than or equal to line 13. On the top of page 1, check box 1, There is no presumption of abuse. Go to Part 3. Do NOT fill out or file Official Form 122A-2.

California

2

To find a list of applicable median income amounts, go online using the link specified in the separate

instructions for this form. This list may also be available at the bankruptcy clerk's office.

13. Calculate the median family income that applies to you. Follow these steps:

14b. Line 12b is more than line 13. On the top of page 1, check box 2, The presumption of abuse is determined by Form 122A-2. Go to Part 3 and fill out Form 122A-2.

Fill in the median family income for your state and size of household.

\$99,936.00

Filed 04/30/25 Entered v Entered 04/30/25 11:12:23 Case 2:25-bk-13578 Eric Steven Doc 1 Debtor 1

Middle Name

Desc Main Case number (if known)

Part 3: Sign Below

nder penalty of perjury that the information on this statement and in any attachments is true and correct.

Signature of Debtor 1

Date 04/29/2025

MM/ DD/ YYYY

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

Debtor 1

Middle Name

Current Monthly Income Details for the Debtor(s)

Debtor 1 Income Details:

Income for the Period 10/01/2024 to 04/01/2025.

Pension or Retirement Income

Source of Income: Pension or Retirement Income

Income by Month:

	Date	Income
6 Months ago	10/2024	\$3,509.09
5 Months ago	11/2024	\$3,509.09
4 Months ago	12/2024	\$3,509.09
3 Months ago	01/2025	\$3,509.09
2 Months ago	02/2025	\$3,517.27
Last Month	03/2025	\$3,517.27
	Average per month:	\$3,511.82

Rental Income

Source of Income: Rental Income

Income by Month:

	Date	Income	Expenses	Net
6 Months ago	10/2024	\$3,095.00	\$216.65	\$2,878.35
5 Months ago	11/2024	\$3,095.00	\$216.65	\$2,878.35
4 Months ago	12/2024	\$3,095.00	\$216.65	\$2,878.35
3 Months ago	01/2025	\$3,095.00	\$216.65	\$2,878.35
2 Months ago	02/2025	\$3,095.00	\$216.65	\$2,878.35
Last Month	03/2025	\$0.00	\$0.00	\$0.00
	Average per month:	\$2,579.17	\$180.54	\$2,398.63

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B2030 (Form 2030) (12/15)

United States Bankruptcy Court Central District of California

In re	Coker,	Eric Steven	
		Case No.	
Debt	or	Chapter7	
		DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEE	BTOR
1.	compens	to 11 U .S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the aboration paid to me within one year before the filing of the petition in bankruptcy, or agreed to be endered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy of	e paid to me, for services rendered
	For legal	services, I have agreed to accept	\$1,600.00
	Prior to th	e filing of this statement I have received	\$1,600.00
	Balance I	Due	\$0.00
2.	The sour	ce of the compensation paid to me was:	
	√ Debto	or Other (specify)	
3.	The sour	ce of compensation to be paid to me is:	
	√ Debto	or Other (specify)	
4.	☑ I hav law firm.	e not agreed to share the above-disclosed compensation with any other person unless they	are members and associates of my
	_	e agreed to share the above-disclosed compensation with a other person or persons who ar A copy of the agreement, together with a list of the names of the people sharing in the comp	-
5.	5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of		ruptcy case, including:
		lysis of the debtor's financial situation, and rendering advice to the debtor in determining wheruptcy;	nether to file a petition in
	b. Prej	paration and filing of any petition, schedules, statements of affairs and plan which may be re	quired;
	c. Rep	resentation of the debtor at the meeting of creditors and confirmation hearing, and any adjou	urned hearings thereof;
6.	By agree	ment with the debtor(s), the above-disclosed fee does not include the following services:	

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B2030 (Form 2030) (12/15)

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

04/29/2025 /s/Benjamin Heston

Date

Benjamin Heston
Signature of Attorney

Bar Number: 297798 Nexus Bankruptcy 3090 Bristol Street #400 Costa Mesa, CA 92626 Phone: (949) 312-1377

Nexus Bankruptcy

Name of law firm

STATEMENT OF RELATED CASES INFORMATION REQUIRED BY LBR 1015-2 UNITED STATES BANKRUPTCY COURT, CENTRAL DISTRICT OF CALIFORNIA

1. A petition under the Bankruptcy Act of 1898 or the Bankruptcy Reform Act of 1978 has previously been filed by or against the debtor, his/her spouse, his or her current or former domestic partner, an affiliate of the debtor, any copartnership or joint venture of which debtor is or formerly was a general or limited partner, or member, or any corporation of which the debtor is a director, officer, or person in control, as follows: (Set forth the complete number and title of each such of prior proceeding, date filed, nature thereof, the Bankruptcy Judge and court to whom assigned, whether still pending and, if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A/B that was filed with any such prior proceeding(s).)

None

2. (If petitioner is a partnership or joint venture) A petition under the Bankruptcy Act of 1898 or the Bankruptcy Reform Act of 1978 has previously been filed by or against the debtor or an affiliate of the debtor, or a general partner in the debtor, a relative of the general partner, general partner of, or person in control of the debtor, partnership in which the debtor is a general partner, general partner of the debtor, or person in control of the debtor as follows: (Set forth the complete number and title of each such prior proceeding, date filed, nature of the proceeding, the Bankruptcy Judge and court to whom assigned, whether still pending and, if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A/B that was filed with any such prior proceeding(s).)

None

3. (If petitioner is a corporation) A petition under the Bankruptcy Act of 1898 or the Bankruptcy Reform Act of 1978 has previously been filed by or against the debtor, or any of its affiliates or subsidiaries, a director of the debtor, an officer of the debtor, a person in control of the debtor, a partnership in which the debtor is general partner, a general partner of the debtor, a relative of the general partner, director, officer, or person in control of the debtor, or any persons, firms or corporations owning 20% or more of its voting stock as follows: (Set forth the complete number and title of each such prior proceeding, date filed, nature of proceeding, the Bankruptcy Judge and court to whom assigned, whether still pending, and if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A/B that was filed with any such prior proceeding(s).)

None

4. (If petitioner is an individual) A petition under the Bankruptcy Reform Act of 1978, including amendments thereof, has been filed by or against the debtor within the last 180 days: (Set forth the complete number and title of each such prior proceeding, date filed, nature of proceeding, the Bankruptcy Judge and court to whom assigned, whether still pending, and if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A/B that was filed with any such prior proceeding(s).)

None

i declare, under penalty of perjury, that the foregoing	ng is true and correct.
Executed at Santa Clarita , California	Eric Steven Coker Signature of Debtor 1
Date: 04/29/2025	
	Signature of Debtor 2

Case 2:25-bk-13578 Doc 1 Filed 04/30/25 Entered 04/30/25 11:12:23 Desc Main Document Page 74 of 77

Attorney or Party Name, Address, Telephone & FAX Nos., State Bar No. & Email Address	FOR COURT USE ONLY
Benjamin Heston	
Bar Number: 297798	
Nexus Bankruptcy	
3090 Bristol Street #400	
Costa Mesa, CA 92626	
Phone: (949) 312-1377 Email: ben@nexusbk.com	
Linaii. Deli@ilexusbk.com	
Debtor(s) appearing without attorney	
Attorney for Debtor(s)	
UNITED STATES BA	NKRUPTCY COURT
CENTRAL DISTRICT OF CA	ALIFORNIA - LOS ANGELES DIVISION
L	OAOE NO
In re:	CASE NO.:
Eric Steven Coker	CHAPTER: 7
	VERIFICATION OF MASTER
	MAILING LIST OF CREDITORS
	[LBR 1007-1(a)]
Debtor(s).	
Pursuant to LBR 1007-1(a), the Debtor, or the Debtor's attorney if applications	able, certifies under penalty of periury that the master mailing list of
	complete, correct, and consistent with the Debtor's schedules and I/we
assume all responsibility for errors and omissions.	
	$\Delta I I'$
Date: 04/29/2025	
	ature of Debtor 1
Date:	
Sign	ature of Debtor 2 (joint debtor) (if applicable)
Date:	
Sign.	ature of Attorney for Debtor (if applicable)

AMERI CAN EXPRESS PO BOX 981535 EL PASO, TX 79998-1535

AVANT / WEBBANK 222 N LA SALLE ST STE 1700 CHICAGO, IL 60601-1101

BMW FINANCIAL SERVICES PO BOX 3608 DUBLIN, OH 43016-0306

CAVALRY PORTFOLIO SERVICES 500 SUMMIT LAKE DR STE 400 VALHALLA, NY 10595-2321

CITIBANK / BEST BUY PO BOX 790441 SAINT LOUIS, MO 63179-0441

CLINICAL PATHOLOGY LABORATORIES PO BOX 141669 AUSTIN, TX 78714-1669

DI SCOVER BANK PO BOX 30943 SALT LAKE CTY, UT 84130-0943

EMORY HEALTHCARE PO BOX 746699 ATLANTA, GA 30374-6699 ENTERPRISE RENT-A-CAR 2200 RENTAL CAR CNTR PKWY 2210 ATLANTA, GA 30337

FREEDOM MORTGAGE PO BOX 619063 DALLAS, TX 75261-9063

GEORGIA POWER 96 ANNEX ATLANTA, GA 30396-0001

GOLDMAN SACHS / APPLE CARD LOCKBOX 6112 PO BOX 7247 PHILADELPHIA, PA 19170-0001

NATIONWI DE MEDICAL 5230 LAS VIRGENES ROAD CALABASAS, CA 91302

PANOLA ENDOSCOPY CENTER 5403 HILLANDALE PARK CT, STE A LITHONIA, GA 30058

RESURGEN ORTHOPEDICS PO BOX 33000 BELFAST, ME 04915-2062

SCHOOLSFIRST FEDERAL CREDIT UNION PO BOX 11547 SANTA ANA, CA 92711-1547 SYNCHRONY / SAMS CLUB PO BOX 71727 PHILADELPHIA, PA 19176-1727

SYNCHRONY / VENMO PO BOX 71737 PHILADELPHIA, PA 19176-1737

T-MOBILE PO BOX 53410 BELLEVUE, WA 98015-3410

UNITED DIGESTIVE PO BOX 24893 NEW YORK, NY 10087-4893

US DEPARTMENT OF HUD 1 SANSOME ST FL 12 SAN FRANCISCO, CA 94104-4430

US SMALL BUSINESS ADMINISTRATION 312 N SPRING ST FL 5 LOS ANGELES, CA 90012-4701

ZYNEX MEDICAL 9655 MAROON CIR ENGLEWOOD, CO 80112-5914